

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

A'LELIA RESIDENTIAL CARE

10 JACOB WHITE RD

YEMASSEE, SC 29945-7820 FACILITY #:843-466-0356

MILES, CARRIE R PH#: 843-466-0356

Facility Email: MILES.66@HOTMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1115 / 09/30/2014

Beaufort / Corporation

10 JACOB WHITE RD

YEMASSEE, SC 29945-7820

MILES RESIDENTIAL CARE FACILITY INC

Alzheimer Care: Yes Max # Residents: 2**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 20****Resident Beds: 20 Resident Rooms: 12****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****ACLIN PLACE**

200 S ACLIN ST

LAKE CITY, SC 29560-2635 FACILITY #:843-394-5677

UWAGBAI, LINDA G PH#: 843-394-5707

Facility Email: GBARNES@FCDSDN.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1257 / 01/31/2015

Florence / State

1211 E NATIONAL CEMETERY RD

FLORENCE, SC 29506-3240

FLORENCE COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 8****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ADDISON'S COMMUNITY CARE HOME**

4013 PERCIVAL RD

COLUMBIA, SC 29229-8321 FACILITY #:803-736-0455

ADDISON-DOCTOR, SARAH PH#: 803-736-0455

Facility Email: SARDCT@BELLSOUTH.NET

Fac. Cont. Email: SARDCT@BELLSOUTH.NET

CRC-0815 / 05/31/2015

Richland / Corporation

PO BOX 23328

COLUMBIA, SC 29224-3328

ADDISON'S COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 9****Resident Beds: 9 Resident Rooms: 5****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****AGAGE ASSISTED LIVING AT NORTH CHARLESTON**

4550 GREAT OAK DR

NORTH CHARLESTON, SC 29418-5001 FACILITY #:843-760-0831

KEAGAN, KELLEY PH#:

Facility Email: SSHIPMAN0460@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1288 / 02/28/2015

Charleston / Ltd. Liability

4550 GREAT OAK DR

NORTH CHARLESTON, SC 29418-5001

AGAGE ASSISTED LIVING OF NORTH CHARLESTON LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 100****Resident Beds: 100 Resident Rooms: 56****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

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AGAPE ASSISTED LIVING

2705 LEAPHART RD

WEST COLUMBIA, SC 29169-3335 FACILITY #:803-939-3000

UNTHANK, RUSSELL A PH#: 803-939-3000

Facility Email: CUNDERHILL@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1067 / 01/31/2015

Lexington / Corporation

2705 LEAPHART RD

WEST COLUMBIA, SC 29169-3335

AGAPE ASSISTED LIVING INC

Alzheimer Care: Yes Max # Residents: 33**Alzheimer Unit: Yes Max # Beds: 24****Total Number of Licensed Beds: 184****Resident Beds: 184 Resident Rooms: 144****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****AGAPE ASSISTED LIVING AT GARDEN CITY**

11951 GRANDHAVEN DR

MURRELLS INLET, SC 29576-7843 FACILITY #:843-357-0200

CRAWFORD, BRYAN M PH#:

Facility Email: JLITTLE@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1424 / 08/31/2014

Horry / Corporation

11951 GRANDHAVEN DR

MURRELLS INLET, SC 29576-7843

AGAPE ASSISTED LIVING AT GARDEN CITY INC

Alzheimer Care: Yes Max # Residents: 111**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 111****Resident Beds: 111 Resident Rooms: 96****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****AGAPE ASSISTED LIVING AT LEXINGTON**

5422 AUGUSTA RD

LEXINGTON, SC 29072-3892 FACILITY #:803-520-5850

PIERCE, ROBERT C PH#: 864-964-9295

Facility Email: KRUSHTON@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1478 / 07/31/2014

Lexington / Corporation

5422 AUGUSTA RD

LEXINGTON, SC 29072-3892

AGAPE ASSISTED LIVING OF LEXINGTON INC

Alzheimer Care: Yes Max # Residents: 25**Alzheimer Unit: Yes Max # Beds: 25****Total Number of Licensed Beds: 90****Resident Beds: 90 Resident Rooms: 80****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****AGAPE ASSISTED LIVING OF CONWAY**

2320 HWY 378

CONWAY, SC 29527-4911 FACILITY #:843-397-2273

WHITEHEAD, MATTHEW R PH#:

Facility Email: JTAYLOR@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1453 / 05/31/2015

Horry / Corporation

2320 HWY 378

CONWAY, SC 29527-4911

AGAPE ASSISTED LIVING OF CONWAY INC

Alzheimer Care: Yes Max # Residents: 32**Alzheimer Unit: Yes Max # Beds: 32****Total Number of Licensed Beds: 100****Resident Beds: 100 Resident Rooms: 58****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

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AGAPE ASSISTED LIVING OF LAURENS

420 W FARLEY AVE

LAURENS, SC 29360-3039 FACILITY #:864-984-9844

MIMS, LYNN PH#:

Facility Email: BBURNS@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1439 / 01/31/2015

Laurens / Corporation

420 W FARLEY AVE

LAURENS, SC 29360-3039

AGAPE ASSISTED LIVING OF LAURENS INC

Alzheimer Care: Yes Max # Residents: 40**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 100****Resident Beds: 100 Resident Rooms: 72****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****AGAPE ASSISTED LIVING OF ROCK HILL**

1785 LEXINGTON COMMON DR

ROCK HILL, SC 29732-3299 FACILITY #:803-207-8000

WHITTLE, ELIZABETH PH#: 803-207-8000

Facility Email: LWHITTLE@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1486 / 12/31/2014

York / Corporation

1785 LEXINGTON COMMON DR

ROCK HILL, SC 29732-3299

AGAPE ASSISTED LIVING OF ROCK HILL INC

Alzheimer Care: Yes Max # Residents: 12**Alzheimer Unit: Yes Max # Beds: 25****Total Number of Licensed Beds: 90****Resident Beds: 90 Resident Rooms: 90****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****AGAPE ASSISTED LIVING OF YORK**

40 ROSS CANNON ST

YORK, SC 29745-1341 FACILITY #:803-454-0365

CALDWELL, MATTHEW A PH#: 706-681-7178

Facility Email: KENNAP@TECHBASE-SOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1368 / 06/30/2014

York / Corporation

1053 CENTER ST

WEST COLUMBIA, SC 29169-6749

AGAPE ASSISTED LIVING OF YORK INC

Alzheimer Care: Yes Max # Residents: 25**Alzheimer Unit: Yes Max # Beds: 25****Total Number of Licensed Beds: 100****Resident Beds: 100 Resident Rooms: 77****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****AGAPE AT HARBISON**

990 COLUMBIA AVE

IRMO, SC 29063-2854 FACILITY #:803-749-7889

DIXON, BRANDI PH#:

Facility Email: DKEAR@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1348 / 06/30/2014

Lexington / Corporation

990 COLUMBIA AVE

IRMO, SC 29063-2854

AGAPE HARBISON INC

Alzheimer Care: Yes Max # Residents: 40**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 82****Resident Beds: 82 Resident Rooms: 63****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

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AGAPE AT KATHWOOD

4520 TRENHOLM RD

COLUMBIA, SC 29206-4425 FACILITY #:803-787-1234

HORTON, THOMAS V PH#: 803-749-7889

Facility Email: CALEXANDER@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1317 / 06/30/2014

Richland / Corporation

4520 TRENHOLM RD

COLUMBIA, SC 29206-4425

AGAPE AT KATHWOOD INC

Alzheimer Care: Yes Max # Residents: 56**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 100****Resident Beds: 100 Resident Rooms: 82****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ALDERSGATE AT THE OAKS**

921 METHODIST OAKS DR

ORANGEBURG, SC 29115-1814 FACILITY #:803-531-2332

JENKINS, LAVEDA B PH#:

Facility Email: TMIZZELL@AOAKS.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1488 / 02/28/2015

Orangeburg / Non-Profit Corporation

PO BOX 1812

ORANGEBURG, SC 29116-1812

ALDERSGATE SPECIAL NEEDS MINISTRY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 6****Resident Beds: 6 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ALEXANDER'S GOLDEN STARR COMMUNITY CARE HOME**

218 GOLDEN STARR RD

SANTEE, SC 29142-9363 FACILITY #:803-854-2496

OUTLAW-THOMAS, DONNA S PH#: 803-854-3731

Facility Email: DONNAOUTLAW62@YAHOO.COM

Fac. Cont. Email: SHILANEDOT@AOL.COM

CRC-0171 / 08/31/2014

Orangeburg / Sole Proprietorship

PO BOX 405

SANTEE, SC 29142-0405

DONNA S OUTLAW-THOMAS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****ANDERSON OAKS ASSISTED LIVING**

997 HWY 90

CONWAY, SC 29526-7520 FACILITY #:843-347-9280

COSGROVE-FLECKNOE, JANICE A PH#: 843-347-9280

Facility Email: JFLECKNOE.ANDERSONOAKS@YAHOO.COM

Fac. Cont. Email: JFLECKNOE.ANDERSONOAKS@YAHOO.COM

CRC-1506 / 07/31/2014

Horry / Corporation

PO BOX 1678

CLEMMONS, NC 27012-1678

HERMAN L ANDERSON INC

Alzheimer Care: Yes Max # Residents: 10**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 80****Resident Beds: 80 Resident Rooms: 60****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

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ANGELIC'S PLACE

903 W BARTLETTE ST

SUMTER, SC 29150-8005 FACILITY #:803-775-1404

GREENE, SHIRLEY H PH#: 803-775-1404

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1400 / 09/30/2014

Sumter / Ltd. Liability

903 W BARTLETTE ST

SUMTER, SC 29150-8005

ANGELIC'S PLACE LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 11****Resident Beds: 11 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ANOINTED RESIDENTIAL CARE**

551 S SUMTER ST

SUMTER, SC 29150-5765 FACILITY #:803-883-4427

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1435 / 03/31/2015

Sumter / Partnership

551 S SUMTER ST

SUMTER, SC 29150-5765

COREY T WRIGHT & DAISY BRADLEY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 5****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ANOINTED RESIDENTIAL CARE #2**

511 S SUMTER ST

SUMTER, SC 29150-5754 FACILITY #:803-883-4032

PH#:

Facility Email: COREYJESSICA63@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1502 / 03/31/2015

Sumter / Partnership

551 S SUMTER ST

SUMTER, SC 29150-5765

COREY T WRIGHT & DAISY BRADLEY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ANTONIO-STAPLES RESIDENTIAL CARE FACILITY**

10745 HWY 78 E

SUMMERVILLE, SC 29483-8710 FACILITY #:843-821-8912

STAPLES, ERMELINDA M PH#: 843-821-8912

Facility Email: Z4TINKERBALL@AOL.COM

Fac. Cont. Email: ANTINIOSTAPLESRCF@COMCAST.NET

CRC-0706 / 03/31/2015

Dorchester / Corporation

10745 HWY 78 E

SUMMERVILLE, SC 29483-8710

ANTONIO-STAPLES RESIDENTIAL CARE FACILITY INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 24****Resident Beds: 24 Resident Rooms: 10****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

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ARBORETUM AT THE WOODLANDS AT FURMAN

50 ARBORETUM LN

GREENVILLE, SC 29617-6227 FACILITY #:864-371-3100

BABBITT, CAROL S PH#:

Facility Email: TCANNADAY@THEWOODLANDSATFURMAN.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1492 / 05/31/2015

Greenville / Non-Profit Corporation

1500 TRAILHEAD CT

GREENVILLE, SC 29617-6226

UPSTATE SENIOR LIVING INC

Alzheimer Care: Yes Max # Residents: 16**Alzheimer Unit: Yes Max # Beds: 16****Total Number of Licensed Beds: 64****Resident Beds: 64 Resident Rooms: 48****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ASHLAN VILLAGE**

415 BRENDA WAY

LYMAN, SC 29365-9264 FACILITY #:864-949-7825

AHO, ROBERT M PH#: 864-949-7825

Facility Email: BAHO@ASHLANVILLAGE.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1483 / 10/31/2014

Spartanburg / Limited Liability

415 BRENDA WAY

LYMAN, SC 29365-9264

ASHLAN PROPERTIES LLC

Alzheimer Care: Yes Max # Residents: 19**Alzheimer Unit: Yes Max # Beds: 22****Total Number of Licensed Beds: 72****Resident Beds: 72 Resident Rooms: 58****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ASHLEY PLACE**

526 HALTIWANGER RD

GREENWOOD, SC 29649-1799 FACILITY #:864-943-1933

MOORE, BRENT PH#:

Facility Email: RMOORE@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1404 / 11/30/2014

Greenwood / Corporation

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

ASHLEY AID OPCO LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 39****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ASHLEY RIVER PLANTATION**

2333 ASHLEY RIVER RD

CHARLESTON, SC 29414-4755 FACILITY #:843-766-9898

CURE, CANDY D PH#: 843-766-9898

Facility Email: No Facility Email on Record

Fac. Cont. Email: CCURE@ROYALOAKLEAF.COM

CRC-1376 / 06/30/2014

Charleston / Limited Liability

SNH SE ASHLEY RIVER TENANT LLC

Alzheimer Care: Yes Max # Residents: 51**Alzheimer Unit: Yes Max # Beds: 51****Total Number of Licensed Beds: 123****Resident Beds: 123 Resident Rooms: 95****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

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ATRIA FOREST LAKE

4405 FOREST DR

COLUMBIA, SC 29206-3103 FACILITY #:803-790-9800

HAMBY, LEIGH ANN PH#: 803-790-9800

Facility Email: LEIGH.HAMBY@ATRIASENIORLIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1143 / 05/31/2015

Richland / Limited Liability

401 S 4TH ST STE 1900, BROWN WILLIAMSON TOWER

LOUISVILLE, KY 40202-4436

WG FOREST LAKE SH LLC

Alzheimer Care: Yes Max # Residents: 16**Alzheimer Unit: Yes Max # Beds: 16****Total Number of Licensed Beds: 60****Resident Beds: 60 Resident Rooms: 55****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****B & B ASSISTED LIVING**

412 PEE DEE CHURCH RD

DILLON, SC 29536-7429 FACILITY #:843-774-0623

MAYNOR, BEVERLY PH#:

Facility Email: DELISA.MCALISTER@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0528 / 12/30/2014

Dillon / Limited Liability

412 PEE DEE CHURCH RD

DILLON, SC 29536-7429

B & B ASSISTED LIVING II LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 30****Resident Beds: 30 Resident Rooms: 16****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****B & J RESIDENTIAL CARE FACILITY**

528 ATTERBURY DR

COLUMBIA, SC 29203-3002 FACILITY #:803-786-0011

DAVIS-EARGLE, EUGENIA M PH#: 803-786-0011

Facility Email: BLUEPEACH54@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1461 / 12/31/2014

Richland / Corporation

213 LINGSTROM LN

COLUMBIA, SC 29212-3234

B & J RESIDENTIAL CARE FACILITY LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BACKHOME CARE FACILITY**

140 CHECKERBERRY LN

CROSS, SC 29436-3599 FACILITY #:843-753-3899

LEE, NEOMIA C PH#: 843-753-3899

Facility Email: NCCBUTLERLEE@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0567 / 01/31/2015

Orangeburg / Corporation

1547 ADDIDAS ST

EUTAWVILLE, SC 29048-9256

BACKHOME CARE FACILITY INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 7****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

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Licensee

BAILEY MANOR

300 JACOBS HWY

CLINTON, SC 29325-9401 FACILITY #:864-833-3425

STANLEY, RITA G PH#: 864-833-3425

Facility Email: R.STANLEY@BAILEYMANOR.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0732 / 08/31/2014

Laurens / Non-Profit Corporation

300 JACOBS HWY

CLINTON, SC 29325-9401

CAROLINA CHRISTIAN MINISTRIES INC

Alzheimer Care: Yes Max # Residents: 8**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 30****Resident Beds: 30 Resident Rooms: 15****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BAYBERRY OF GREENWOOD**

116 ABBEY DR

GREENWOOD, SC 29649-8536 FACILITY #:864-223-6510

GAMBRELL, CATHY B PH#: 864-223-6510

Facility Email: THEBAYBERRY@NCTV.COM

Fac. Cont. Email: THEBAYBERRY@NCTV.COM

CRC-0589 / 05/31/2015

Greenwood / Limited Liability Limited Partnership

116 ABBEY DR

GREENWOOD, SC 29649-8536

EVERGREEN VILLAGES LIMITED PARTNERSHIP

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 23****Resident Beds: 23 Resident Rooms: 23****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BAYBERRY OF GREER**

309 NORTHVIEW DR

GREER, SC 29651-1340 FACILITY #:864-848-1935

PRITCHETT, NATASHA J PH#: 864-848-1935

Facility Email: GREER@THEBAYBERRYINN.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0595 / 07/31/2014

Greenville / Limited Liability Limited Partnership

309 NORTHVIEW DR

GREER, SC 29651-1340

EVERGREEN VILLAGES LIMITED PARTNERSHIP

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 23****Resident Beds: 23 Resident Rooms: 23****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BEARD RESIDENTIAL CARE FACILITY #1**

123 N WARREN ST

TIMMONSVILLE, SC 29161-1443 FACILITY #:843-346-5272

BEARD, CATHERINE H PH#: 843-346-5272

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0140 / 04/30/2015

Florence / Sole Proprietorship

123 N WARREN ST

TIMMONSVILLE, SC 29161-1443

CATHERINE H BEARD

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 3****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0**

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BEARD RESIDENTIAL CARE FACILITY #2

301 N ORANGE ST
TIMMONSVILLE, SC 29161-1435 FACILITY #:843-346-5272
BEARD, CATHERINE H PH#: 843-346-5272
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0082 / 04/30/2015
Florence / Sole Proprietorship
123 N WARREN ST
TIMMONSVILLE, SC 29161-1443
CATHERINE H BEARD

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

BEARD'S RESIDENTIAL CARE FACILITY #3

201 N BROCKINGTON ST
TIMMONSVILLE, SC 29161-1503 FACILITY #:843-346-5272
BEARD JR, JAMES PH#: 843-346-5272
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0331 / 12/31/2014
Florence / Sole Proprietorship
201 N BROCKINGTON ST
TIMMONSVILLE, SC 29161-1503
CATHERINE H BEARD

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 3
Staff Beds: 1 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BELL'S PROFESSIONAL RESIDENTIAL HOME CARE

1910 DALTON ST
CHARLESTON, SC 29406-3961 FACILITY #:843-744-1765
BELL, TROY A PH#: 843-744-1765
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1209 / 05/31/2014 (Renewal Pending)
Charleston / Ltd. Liability
1155 MARQUIS RD
NORTH CHARLESTON, SC 29405-4353
BELL'S PROFESSIONAL RESIDENTIAL HOME CARE LLC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 20
Resident Beds: 20 Resident Rooms: 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BELVEDERE COMMONS OF SENECA

515 BENTON ST
SENECA, SC 29672-6883 FACILITY #:864-888-4114
BROOM, BARBARA B PH#: 864-888-4114
Facility Email: BBROOM@BELVEDERECOMMONSSENECA.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1466 / 11/30/2014
Oconee / Ltd. Liability
515 BENTON ST
SENECA, SC 29672-6883
FKP SENECA SENIOR LIVING TENANT LLC

Alzheimer Care: Yes Max # Residents: 30
Alzheimer Unit: Yes Max # Beds: 21

Total Number of Licensed Beds: 62
Resident Beds: 62 Resident Rooms: 47
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

BENCHMARK HOMES - SPARTANBURG

450 W HENRY ST
SPARTANBURG, SC 29306-6037 FACILITY #:864-585-0322
MASON, SUZAN B PH#:
Facility Email: JBERNARD@CHARLESLEA.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1509 / 09/30/2014
Spartanburg / State
195 BURDETTE ST
SPARTANBURG, SC 29307-1003
CHARLES LEA CENTER

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 12
Resident Beds: 12 Resident Rooms: 12
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BETHEA BAPTIST ASSISTED LIVING

157 HOME AVE
DARLINGTON, SC 29532-7625 FACILITY #:843-393-2867
SPURLING, BENJAMIN S PH#: 843-393-2867
Facility Email: BSPURLING@SCBMA.COM
Fac. Cont. Email: BSPURLING@SCBMA.COM

CRC-1533 / 08/31/2014
Darlington / Non-Profit Corporation
157 HOME AVE
DARLINGTON, SC 29532-7625
SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 14
Resident Beds: 14 Resident Rooms: 12
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BIRD STREET I COMMUNITY RESIDENTIAL CARE FACILITY

1705 BIRD ST
ROCK HILL, SC 29730-3830 FACILITY #:803-628-5999
MCKNIGHT, SHARON PH#: 803-366-7121
Facility Email: MPOOLE@YORKDSNB.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1357 / 06/30/2014
York /
PO BOX 59
YORK, SC 29745-0059
YORK COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BIRD STREET II COMMUNITY RESIDENTIAL CARE FACILITY

1711 BIRD ST
ROCK HILL, SC 29730-3830 FACILITY #:803-628-5999
MCKNIGHT, SHARON PH#: 803-366-6113
Facility Email: MPOOLE@YORKDSNB.ORG
Fac. Cont. Email: SMCKNIGHT@YORKDSNB.ORG

CRC-1358 / 06/30/2014
York /

YORK COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

BISHOP GADSDEN EPISCOPAL COMMUNITY

1 BISHOP GADSDEN WAY
CHARLESTON, SC 29412-3501 FACILITY #:843-762-3300
TRAWICK, C WILLIAM PH#: 843-762-3300
Facility Email: SARAH.TIPTON@BISHOPGADSDENORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0451 / 11/30/2014
Charleston / Non-Profit Corporation
1 BISHOP GADSDEN WAY
CHARLESTON, SC 29412-3501
BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY

Alzheimer Care: Yes Max # Residents: 20
Alzheimer Unit: Yes Max # Beds: 20

Total Number of Licensed Beds: 112
Resident Beds: 112 Resident Rooms: 112
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BISHOPVILLE MANOR

2779 HWY 15 N
BISHOPVILLE, SC 29010-7101 FACILITY #:803-428-2222
GOLDEN, IDA M PH#: 803-428-2222
Facility Email: RICKIE.TILLEA@CTP-CPA.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1108 / 06/30/2015
Lee / Corporation
PO BOX 312
BISHOPVILLE, SC 29010-0312
BISHOPVILLE MANOR INC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 44
Resident Beds: 44 Resident Rooms: 14
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BLACK'S DRIVE COMMUNITY RESIDENCE

160 BLACKS DR
WILLISTON, SC 29853-3558 FACILITY #:803-259-7472
GRANT, ARETHA F PH#: 803-259-7472
Facility Email: BJONES@BARNWELLSC.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1524 / 08/31/2014
Aiken / County
ALLENDAL/ BARNWELL COUNTIES DISABILITIES AND SPECIAL
NEEDS BOARD

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BLOOM AT BELFAIR

60 OAK FOREST RD
BLUFFTON, SC 29910-5010
EADS, JEFFREY A PH#: 254-254-2542
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1510 / 12/31/2014
Beaufort / Limited Liability
3 HARVEST LN
BEAUFORT, SC 29907-2042
BLOOMFIELD SENIOR LIVING OF BLUFFTON LLC

Alzheimer Care: Yes Max # Residents: 23
Alzheimer Unit: Yes Max # Beds: 23

Total Number of Licensed Beds: 68
Resident Beds: 68 Resident Rooms: 48
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

BLOOM AT BLUFFTON

800 FORDING ISLAND RD

BLUFFTON, SC 29910-4845 FACILITY #:843-815-2555

TITUS-CONEY, LESLIE A PH#: 843-815-2555

Facility Email: SFRAZIER@BROOKDALELIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1381 / 04/30/2015

Beaufort /

BLOOMFIELD SENIOR LIVING OF BLUFFTON II LLC

Alzheimer Care: Yes Max # Residents: 10**Alzheimer Unit: Yes Max # Beds: 24****Total Number of Licensed Beds: 70****Resident Beds: 70 Resident Rooms: 62****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BLOOM AT HILTON HEAD**

35 BEACH CITY RD

HILTON HEAD ISLAND, SC 29926-4725 FACILITY #:843-342-5599

FRISCH, STEVEN G PH#: 843-342-5599

Facility Email: ADMIN@BLOOMATHILTONHEAD.COM

Fac. Cont. Email: ADMIN@BLOOMATHILTONHEAD.COM

CRC-1382 / 04/30/2015

Beaufort /

6737 W WASHINGTON ST STE 2300

MILWAUKEE, WI 53214-5650

BLOOMFIELD SENIOR LIVING OF HILTON HEAD LLC

Alzheimer Care: Yes Max # Residents: 42**Alzheimer Unit: Yes Max # Beds: 30****Total Number of Licensed Beds: 72****Resident Beds: 72 Resident Rooms: 57****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BOSTICK'S ADULT RESIDENTIAL CARE FACILITY**

1912 DUKE ST

BEAUFORT, SC 29902-4404 FACILITY #:843-524-3906

BURNS, WANDA BOSTICK PH#: 843-524-3906

Facility Email: BARCF1@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0143 / 05/31/2015

Beaufort / Sole Proprietorship

PO BOX 1841

BEAUFORT, SC 29901-1841

WANDA BOSTRICK BURNS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 20****Resident Beds: 20 Resident Rooms: 6****Staff Beds: 2 Staff Rooms: 2****Other Beds: 0 Other Rooms: 0****BOWLES COMMUNITY CARE HOME**

9270 N HWY 17

MC CLELLANVILLE, SC 29458-9422 FACILITY #:843-887-4180

BOWLES, BENJAMIN PH#: 843-887-4180

Facility Email: BBOWCARE@AOL.COM

Fac. Cont. Email: BBOWCARE@AOL.COM

CRC-0090 / 09/30/2014

Charleston / Sole Proprietorship

9270 N HWY 17

MC CLELLANVILLE, SC 29458-9422

BENJAMIN, BOWLES

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 16****Resident Beds: 16 Resident Rooms: 7****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

BOWLES COMMUNITY CARE HOME 2

9274 N HWY 17

MCCLELLANVILLE, SC 29458-9422 FACILITY #:843-887-4180

BOWLES, BENJAMIN PH#: 843-887-4180

Facility Email: BBOWCARE@AOL.COM

Fac. Cont. Email: BBOWCARE@AOL.COM

CRC-1497 / 11/30/2014

Charleston / Sole Proprietorship

9270 N HWY 17

MC CLELLANVILLE, SC 29458-9422

BOWLES, BENJAMIN

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BRIAN'S RESIDENTIAL CARE**

1115 WHITMAN ST

ORANGEBURG, SC 29115-6150 FACILITY #:803-533-1588

STOKES, ALBERT O PH#: 803-533-1588

Facility Email: ASTOKES@SC.RR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0418 / 02/28/2015

Orangeburg / Partnership

1027 BERKELEY DR

ORANGEBURG, SC 29118-8356

ALBERT STOKES AND DELAURA STOKES

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 7****Resident Beds: 7 Resident Rooms: 3****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****BRIAN'S RESIDENTIAL CARE II**

4003 CALHOUN ST

BRANCHVILLE, SC 29432-2243 FACILITY #:803-274-8051

STOKES, DELAURA PH#: 803-274-8051

Facility Email: STOKES411@SC.RR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0947 / 09/30/2014

Orangeburg / Partnership

1027 BERKELEY DR

ORANGEBURG, SC 29118-8356

ALBERT STOKES AND DELAURA STOKES

Alzheimer Care: Yes Max # Residents: 1**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 20****Resident Beds: 20 Resident Rooms: 11****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BRIANA'S RESIDENTIAL CARE FACILITY**

252 CHARLESTON AVE N

FAIRFAX, SC 29827-4502 FACILITY #:803-632-9813

JENKINS, GENORA W PH#: 803-632-9813

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1333 / 11/30/2014

Allendale / Sole Proprietorship

649 HAMPTON AVE N

FAIRFAX, SC 29827-4313

JOHN W WALKER

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 5****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

BRIDGE ASSISTED LIVING AT LIFE CARE CENTER OF CHARLESTON

2590 ELMS PLANTATION BLVD

NORTH CHARLESTON, SC 29406-8105 FACILITY #:843-553-6342

NELSON, MICHELLE M PH#: 843-553-6342

Facility Email: CNELSON@CENTRYPA.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1064 / 10/31/2014

Charleston / Ltd. Liability

3570 KEITH ST NW

CLEVELAND, TN 37312-4309

CHARLESTON RETIREMENT INVESTORS LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 100****Resident Beds: 100 Resident Rooms: 65****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BRIGHTWATER ASSISTED LIVING**

201 BRIGHTWATER DR

MYRTLE BEACH, SC 29579-8298 FACILITY #:843-903-8940

TREMBLE, WILLIAM MARCEL PH#: 843-903-8300

Facility Email: JJJUSTICE@BRIGHTWATER-LIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1489 / 04/30/2015

Horry / Limited Liability

201 BRIGHTWATER DR

MYRTLE BEACH, SC 29579-8298

BRIGHTWATER RETIREMENT LLC

Alzheimer Care: Yes Max # Residents: 0**Alzheimer Unit: Yes Max # Beds: 24****Total Number of Licensed Beds: 56****Resident Beds: 56 Resident Rooms: 48****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BROAD CREEK CARE CENTER ASSISTED LIVING**

801 LEMON GRASS CT

HILTON HEAD ISLAND, SC 29928-3022 FACILITY #:843-341-7300

JOHNSON, STEPHANI PH#: 843-341-7300

Facility Email: SJOHNSON@VILIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1036 / 07/31/2014

Beaufort / Corporation

801 LEMON GRASS CT

HILTON HEAD ISLAND, SC 29928-3022

CC-HILTON HEAD INC

Alzheimer Care: Yes Max # Residents: 50**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 50****Resident Beds: 50 Resident Rooms: 50****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****BROOK PINE COMMUNITY RESIDENTIAL CARE FACILITY**

3961 FISH HATCHERY RD

GASTON, SC 29053-9038 FACILITY #:803-955-3821

MURPHY, LAVERNE PH#: 803-955-3821

Facility Email: LMD60@SCDMH.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1302 / 06/30/2014

Lexington / State

3961 FISH HATCHERY RD

GASTON, SC 29053-9038

LEXINGTON COUNTY COMMUNITY MENTAL HEALTH CENTER (LCCMHC)

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 16****Resident Beds: 16 Resident Rooms: 11****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

BROOKWOOD COMMUNITY RESIDENCE

181 BROOKWOOD DR
BATESBURG, SC 29006-2324 FACILITY #:803-532-4440
RUFF JR, MURRY J PH#: 803-532-4440
Facility Email: JRUFF@BABCOCKCENTER.ORG
Fac. Cont. Email: MGARRISON@BABCOCKCENTER.ORG

CRC-0879 / 09/30/2014
Lexington / Non-Profit Corporation
PO BOX 4389, BABCOCK CENTER INC
WEST COLUMBIA, SC 29171-4389
BABCOCK CENTER INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

BTU REST HOME

113 ELLISON ST
BENNETTSVILLE, SC 29512-0352 FACILITY #:843-479-9053
CAIN, MICHAEL PH#: 843-479-9053
Facility Email: BTURESTHOME@AOL.COM
Fac. Cont. Email: MICHAELCAIN94@AOL.COM

CRC-0235 / 09/30/2014
Marlboro / Corporation
PO BOX 352
BENNETTSVILLE, SC 29512-0352
BTU REST HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 80
Resident Beds: 80 **Resident Rooms: 35**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

BUILDERS CARE HOME

731 SIMS AVE
COLUMBIA, SC 29205-1837 FACILITY #:803-376-8991
PH#:
Facility Email: COLUMBIAHOMECARE73@ATT.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1491 / 04/30/2015
Richland / Non-Profit Corporation
731 SIMS AVE
COLUMBIA, SC 29205-1837
ALDERSGATE SPECIAL NEEDS MINISTRY

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 6
Resident Beds: 6 **Resident Rooms: 6**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

BURGESS RESIDENTIAL CARE FACILITY

2591 S BREHENAN DR
FLORENCE, SC 29505-6203 FACILITY #:843-665-6843
BURGESS, SANDY M PH#: 843-665-6843
Facility Email: SANDYBURGESS98@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0925 / 04/30/2015
Florence / Sole Proprietorship
PO BOX 6023
FLORENCE, SC 29502-6023
SANDY BURGESS

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 4**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

C & S ASSISTED LIVING

726 BARTON RD
ALLENDALE, SC 29810-5010 FACILITY #:803-584-5090
HAMILTON, DA'ASIA S PH#: 803-943-7177
Facility Email: C&SASSISTEDLIVING@ATT.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1220 / 08/31/2014
Allendale / Sole Proprietorship
726 BARTON RD
ALLENDALE, SC 29810-5010
MARY ANN FIELDS

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 2**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

CABADING HOMES #1

3431 RIVERS AVE
NORTH CHARLESTON, SC 29405-7760 FACILITY #:843-747-3050
CABADING, LOLITA B PH#: 843-745-9182
Facility Email: CABOOTY105@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0394 / 07/31/2014
Charleston / Corporation
3431 RIVERS AVE
NORTH CHARLESTON, SC 29405-7760
CABADING HOMES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 18
Resident Beds: 18 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

CABADING HOMES #2

3435 RIVERS AVE
NORTH CHARLESTON, SC 29405-7760 FACILITY #:843-745-9182
CABADING, LOLITA B PH#: 843-745-9182
Facility Email: CABOOTY105@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0571 / 02/28/2015
Charleston / Corporation
2149 DORCHESTER RD
NORTH CHARLESTON, SC 29405-7763
CABADING HOMES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 15
Resident Beds: 15 **Resident Rooms: 7**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

CABADING HOMES #3

2149 DORCHESTER RD
NORTH CHARLESTON, SC 29405-7763 FACILITY #:843-745-9182
CABADING, ALLAN M PH#: 843-745-9182
Facility Email: CABOOTY105@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0825 / 07/31/2014
Charleston / Corporation
2149 DORCHESTER RD
NORTH CHARLESTON, SC 29405-7763
CABADING HOMES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 25
Resident Beds: 25 **Resident Rooms: 13**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CAMDEN I

975 WATEREE BLVD

CAMDEN, SC 29020-4134 FACILITY #:803-432-0973

WRIGHT, CRYSTAL J PH#: 803-432-1345

Facility Email: S.TURNER@CHESCOSERVICES.ORG

Fac. Cont. Email: CCBDSN@INFOAVE.NET

CRC-1525 / 09/30/2014

Kershaw / County

CHESCO SERVICES

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CAMDEN II

975 WATEREE BLVD

CAMDEN, SC 29020-4134 FACILITY #:803-432-1345

WRIGHT, CRYSTAL J PH#: 803-432-1345

Facility Email: S.TURNER@CHESCOSERVICES.ORG

Fac. Cont. Email: CCBDSN@INFOAVE.NET

CRC-1522 / 05/31/2015

Kershaw / County

975 WATEREE BLVD

CAMDEN, SC 29020-4134

CHESCO SERVICES

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CAMP COMMUNITY RESIDENCE

1251 CAMP RD

JAMES ISLAND, SC 29412-9212 FACILITY #:843-805-5820

SIMMONS, CYNTHIA Y PH#: 843-762-9827

Facility Email: No Facility Email on Record

Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

CRC-1371 / 01/31/2015

Charleston / State

PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNT

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CANTRELL'S RESIDENTIAL CARE FACILITY

124 GLADYS CT

SPARTANBURG, SC 29301-3701 FACILITY #:864-587-1993

WALKER, LINDA C PH#: 864-587-1993

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: LCWALKER428@YAHOO.COM

CRC-1105 / 06/30/2014

Spartanburg / Corporation

124 GLADYS CT

SPARTANBURG, SC 29301-3701

CANTRELL'S RESIDENTIAL CARE FACILITY INC

Alzheimer Care: Yes Max # Residents: 22
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 22
Resident Beds: 22 Resident Rooms: 10
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CARE WITH LOVE

3408 LENAPE ST

NORTH CHARLESTON, SC 29405-7777 FACILITY #:843-744-0313

SANDERS, JUANITA PH#: 843-744-0313

Facility Email: CAREWITHLOVE@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1499 / 11/30/2014

Charleston / Sole Proprietorship

2240 DOVER ST

NORTH CHARLESTON, SC 29405-7939

NELSON, TIFFANY

Alzheimer Care: No **Max # Residents: 0****Alzheimer Unit: No** **Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5** **Resident Rooms: 4****Staff Beds: 1** **Staff Rooms: 1****Other Beds: 0** **Other Rooms: 0****CARE WITH LOVE II**

2109 COMMANDER RD

NORTH CHARLESTON, SC 29405-7704 FACILITY #:843-744-0313

SKIPPER, LAVERNE PH#: 843-744-0313

Facility Email: CAREWITHLOVE@ATT.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1523 / 08/31/2014

Charleston / Sole Proprietorship

NELSON, TIFFANY

Alzheimer Care: No **Max # Residents: 0****Alzheimer Unit: No** **Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5** **Resident Rooms: 5****Staff Beds: 1** **Staff Rooms: 0****Other Beds: 0** **Other Rooms: 0****CAROLINA PLACE**

240 CHARLES ST

LAKE CITY, SC 29560-2161 FACILITY #:843-394-5707

UWAGBAI, LINDA G PH#: 843-394-5707

Facility Email: LUWAGBAI@FCDSN.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1258 / 01/31/2015

Florence / State

1211 E NATIONAL CEMETERY RD

FLORENCE, SC 29506-3240

FLORENCE COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No **Max # Residents: 0****Alzheimer Unit: No** **Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8** **Resident Rooms: 8****Staff Beds: 0** **Staff Rooms: 0****Other Beds: 0** **Other Rooms: 0****CAROLINIAN**

718 S DARGAN ST

FLORENCE, SC 29506-2559 FACILITY #:843-665-9314

WILCOX, KATHRYN D PH#: 843-665-9314

Facility Email: KATHRYN.WILCOX@RHF.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0468 / 04/30/2015

Florence / Corporation

718 S DARGAN ST

FLORENCE, SC 29506-2559

FLORENCE RHF HOUSING INC

Alzheimer Care: Yes **Max # Residents: 10****Alzheimer Unit: No** **Max # Beds: 0****Total Number of Licensed Beds: 38****Resident Beds: 38** **Resident Rooms: 38****Staff Beds: 0** **Staff Rooms: 0****Other Beds: 0** **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CARRIAGE HOUSE OF FLORENCE

739 S PARKER DR

FLORENCE, SC 29501-6062 FACILITY #:843-661-6655

COLLINS, VIRGINIA L PH#: 843-661-6655

Facility Email: GINGERCHF@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0996 / 03/31/2015

Florence / Corporation

PO BOX 6079

FLORENCE, SC 29502-6079

CARRIAGE HOUSE OF FLORENCE INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 80****Resident Beds: 80 Resident Rooms: 40****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CARRIAGE HOUSE OF HARTSVILLE**

1311 E HOME AVE

HARTSVILLE, SC 29550-3415 FACILITY #:843-383-6990

SINGLETARY, MARY J PH#: 843-383-6990

Facility Email: CARRIAGEHOUSE521@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0994 / 03/31/2015

Darlington / Corporation

1311 HOME AVE

HARTSVILLE, SC 29550-3415

CARRIAGE HOUSE OF HARTSVILLE INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 60****Resident Beds: 60 Resident Rooms: 30****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CARRIAGE HOUSE OF SUMTER**

431 N MAIN ST

SUMTER, SC 29150-4232 FACILITY #:803-773-0965

MCALISTER, DELISA C PH#: 803-774-5700

Facility Email: CARRIAGEHOUSEOFSUMTER@HOTMAIL.COM

Fac. Cont. Email: CLARDY@SC.RR.COM

CRC-0997 / 03/31/2015

Sumter / Corporation

431 N MAIN ST

SUMTER, SC 29150-4232

CARRIAGE HOUSE OF SUMTER INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 60****Resident Beds: 60 Resident Rooms: 30****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CARRIAGE HOUSE OF TAYLORS**

402 W MAIN ST

TAYLORS, SC 29687-2951 FACILITY #:864-292-2416

COLEMAN, ALLYE V PH#:

Facility Email: CHTAYLORS@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0978 / 02/28/2015

Greenville / Corporation

402 W MAIN ST

TAYLORS, SC 29687-2951

CARRIAGE HOUSE OF TAYLORS INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 24****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CARSON'S COMMUNITY CARE

10219 FARROW RD
BLYTHEWOOD, SC 29016-9612 FACILITY #:803-786-7513
CARSON, ANNIE P PH#: 803-786-7513
Facility Email: CARSONSCOMMUNITYCARE@GMAIL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0916 / 02/28/2015
Richland / Sole Proprietorship
10219 FARROW RD
BLYTHEWOOD, SC 29016-9612
JAMES E CARSON

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 5**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

CARTER-MAY HOME

1660 INGRAM RD
CHARLESTON, SC 29407-4242 FACILITY #:843-556-8314
BAUDER, JANINE NEWELL PH#: 843-556-8314
Facility Email: JANINE@CATHOLIC-DOC.ORG
Fac. Cont. Email: JANINE@CATHOLIC-DOC.ORG

CRC-0064 / 04/30/2015
Charleston / Corporation
1660 INGRAM RD
CHARLESTON, SC 29407-4242
CATHOLIC CHARITIES OF THE DIOCESE OF CHARLESTON INC

Alzheimer Care: Yes **Max # Residents: 2**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 25
Resident Beds: 25 **Resident Rooms: 23**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

CASCADES VERDAE ASSISTED LIVING

30 SPRINGCREST CT
GREENVILLE, SC 29607-4034 FACILITY #:864-528-5501
KEEGAN, CARI LYNN PH#: 864-943-1933
Facility Email: THECASCADESVERDAE.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1490 / 04/30/2015
Greenville / Limited Liability
30 SPRINGCREST CT
GREENVILLE, SC 29607-4034
CASCADES NURSING LLC

Alzheimer Care: Yes **Max # Residents: 13**
Alzheimer Unit: Yes **Max # Beds: 24**

Total Number of Licensed Beds: 92
Resident Beds: 92 **Resident Rooms: 72**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

CASUAL COMMUNITY CARE HOME

112 GOODRICH ST
COLUMBIA, SC 29223-7725 FACILITY #:803-788-2721
BRIGGS, MARY E PH#: 803-788-2721
Facility Email: MARYBRIGGS1@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0701 / 01/31/2015
Richland / Sole Proprietorship
PO BOX 121
STATE PARK, SC 29147-0121
MARY BRIGGS

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 4**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CATAWBA COMMUNITY CARE HOME

400 ROWELLS RD

CATAWBA, SC 29704-8769 FACILITY #:803-329-3377

TERRY, PATRICIA B PH#: 803-329-3377

Facility Email: PATTERRY@NAVACORENET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0743 / 11/30/2014

York / Corporation

PO BOX 65

CATAWBA, SC 29704-0065

CATAWBA COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 72****Resident Beds: 72 Resident Rooms: 31****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CATHERINE'S MANOR I**

376 TUCKER ST

ORANGEBURG, SC 29115-6821 FACILITY #:803-531-2088

CARR JR, GUSS PH#: 803-531-2088

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0087 / 06/30/2014

Orangeburg / Sole Proprietorship

261 SUMMERS AVE

ORANGEBURG, SC 29115-5421

CATHERINE CARR

Alzheimer Care: Yes Max # Residents: 5**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****CATHERINE'S MANOR II**

261 SUMMERS AVE

ORANGEBURG, SC 29115-5421 FACILITY #:803-539-0899

CARR JR, GUSS PH#: 803-539-0899

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1033 / 08/31/2014

Orangeburg / Sole Proprietorship

261 SUMMERS AVE

ORANGEBURG, SC 29115-5421

CATHERINE CARR

Alzheimer Care: Yes Max # Residents: 5**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****CHARDON PLACE**

3455 BOHICKET RD

JOHNS ISLAND, SC 29455-7222 FACILITY #:843-768-4948

KULSICAVAGE, ANNA MARIE PH#: 843-768-4948

Facility Email: DAVESWILLIS@GMAIL.COM

Fac. Cont. Email: DSWILLIS@YAHOO.COM

CRC-1462 / 01/31/2015

Charleston / Ltd. Liability

3455 BOHICKET RD

JOHNS ISLAND, SC 29455-7222

CHARDON PROPERTY LLC

Alzheimer Care: Yes Max # Residents: 4**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 16****Resident Beds: 16 Resident Rooms: 16****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CHARLES M INGRAM SR COMMUNITY RESIDENCE

1615 STATE RD

CHERAW, SC 29520-5107 FACILITY #:843-537-5122

PETERKIN, MARGARETE PH#: 843-623-9016

Facility Email: M.PETERKIN@CHESCOSERVICES.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1440 / 05/31/2014 (Renewal Pending)

Chesterfield / County

1615 STATE RD

CHERAW, SC 29520-5107

CHESCO SERVICES

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CHEROKEE COUNTY COMMUNITY RESIDENTIAL CARE FACILITY**

1434 N LIMESTONE ST

GAFFNEY, SC 29340-4798 FACILITY #:864-487-2717

MATTHEWS, CINDY F PH#: 864-487-2717

Facility Email: CINDYMATTHEWSPTC@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0729 / 09/30/2014

Cherokee / County

1434 N LIMESTONE ST

GAFFNEY, SC 29340-4798

CHEROKEE COUNTY COUNCIL

Alzheimer Care: Yes Max # Residents: 3**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 28****Resident Beds: 28 Resident Rooms: 15****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CHESTERFIELD COMMUNITY RESIDENCE**

817 E MAIN ST

CHESTERFIELD, SC 29709-1807 FACILITY #:843-623-6586

PETERKIN, MARGARETE PH#: 843-623-9016

Facility Email: M.PETERKIN@CHESCOSERVICES.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1441 / 03/31/2015

Chesterfield / County

817 E MAIN ST

CHESTERFIELD, SC 29709-0151

CHESCO SERVICES

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CLARKE HOUSE**

919 SHILOH RD

SALUDA, SC 29138-8101 FACILITY #:864-445-8816

CLARKE, IDORA H PH#: 864-445-8816

Facility Email: THECLARKEHOUSE@EMBARGMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0485 / 07/31/2014

Saluda / Sole Proprietorship

919 SHILOH RD

SALUDA, SC 29138-8101

IDORA H CLARKE

Alzheimer Care: Yes Max # Residents: 1**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 18****Resident Beds: 18 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CLEMSON DOWNS ASSISTED LIVING

500 DOWNS LOOP

CLEMSON, SC 29631-2099 FACILITY #:864-654-1155

LEHEUP, JOHN D PH#: 864-654-1155

Facility Email: WANDAPALMER@CLEMSONDOWNS.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1154 / 04/30/2015

Pickens / Corporation

500 DOWNS LOOP

CLEMSON, SC 29631-2099

CARC INC

Alzheimer Care: Yes Max # Residents: 0**Alzheimer Unit: Yes Max # Beds: 32****Total Number of Licensed Beds: 56****Resident Beds: 56 Resident Rooms: 56****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CLS CARE HOME**

1024 TUCKER TOWN RD STE 1024A

GADSDEN, SC 29052-9789 FACILITY #:803-353-2151

SPEARMAN, HELEN D PH#: 803-353-2151

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1200 / 06/01/2014 (Renewal Pending)

Richland / Sole Proprietorship

1024 TUCKER TOWN RD STE 1024A

GADSDEN, SC 29052-9789

CORA SCOTT

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****COLLETON COURTYARD**

210 ACADEMY RD

WALTERBORO, SC 29488-9208 FACILITY #:843-538-8181

PH#:

Facility Email: COLLETONCOURTYARD@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1484 / 12/31/2013 (Renewal Pending)

Colleton / Limited Liability

210 ACADEMY RD

WALTERBORO, SC 29488-9208

LAKEFIELD PROPERTIES LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 24****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****COMMUNITY RESIDENTIAL CARE FACILITY**

703 BROAD ST

SUMTER, SC 29150-3309 FACILITY #:803-773-3443

MOORE, HARRIETT D PH#: 803-773-6525

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0613 / 12/31/2014

Sumter / Non-Profit Corporation

PO BOX 3818

SUMTER, SC 29151-3818

COMMUNITY INTERMEDIATE CARE FACILITY INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 20****Resident Beds: 20 Resident Rooms: 16****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

COOPER HALL AT THE PALMS OF MT PLEASANT

937 BOWMAN RD OFC

MOUNT PLEASANT, SC 29464-3222 FACILITY #:843-884-6949

GILLESPIE, CRIS J PH#: 843-849-3096

Facility Email: TCOOK@BELLPARTNERSINC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1432 / 06/30/2014

Charleston /

SNH SE SG TENANT LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 42****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****COTTONWOOD VILLAS**

800 W CHURCH ST

BISHOPVILLE, SC 29010-1054 FACILITY #:803-484-5303

SHEALY, HARRIETT H PH#: 803-484-5303

Facility Email: FGAINEY@COOKE-ASSOCIATES.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1186 / 10/31/2014

Lee / Limited Liability

LAKEFIELD PROPERTIES LLC

Alzheimer Care: Yes Max # Residents: 3**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 71****Resident Beds: 71 Resident Rooms: 43****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****COUNTRY CARE OF FAIR PLAY**

207 FARM HOUSE LN

FAIR PLAY, SC 29643-2207 FACILITY #:864-972-1072

MOORE, PEGGY D PH#: 864-231-0059

Facility Email: PEGMOORE2@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1041 / 04/30/2015

Oconee / Limited Liability

207 FARM HOUSE LN

FAIR PLAY, SC 29643-2207

CCC OF FAIR PLAY LLC

Alzheimer Care: Yes Max # Residents: 14**Alzheimer Unit: Yes Max # Beds: 14****Total Number of Licensed Beds: 14****Resident Beds: 14 Resident Rooms: 11****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****COUNTRY COMFORT COMMUNITY HOME**

204 JOE APREE CIR

BLYTHEWOOD, SC 29016-8807 FACILITY #:803-735-9777

COUNTS, CLIFFORD A PH#: 803-920-9927

Facility Email: COUNTS_COUNTRYCOMFORT@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1467 / 02/28/2015

Richland /

COUNTRY COMFORT HOMES LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 9****Resident Beds: 9 Resident Rooms: 4****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

COUNTRYWOOD ASSISTED LIVING

1645 RIDGE RD

HOPKINS, SC 29061-8432 FACILITY #:803-776-3873

HUNT, JOSEPH R PH#: 803-776-3873

Facility Email: LHAYNES@STERLING-HEALTH.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1465 / 11/30/2014

Richland / Ltd. Liability

1645 RIDGE RD

HOPKINS, SC 29061-8432

COUNTRYWOOD NURSING CENTER LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 26****Resident Beds: 26 Resident Rooms: 13****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****COVENANT PLACE**

2825 CARTER RD OFC

SUMTER, SC 29150-1736 FACILITY #:803-469-7007

LINDER SR, RISLEY E PH#: 803-469-7007

Facility Email: RLINDER@COVENANTPLACE.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0758 / 03/31/2015

Sumter / Non-Profit Corporation

2825 CARTER RD OFC

SUMTER, SC 29150-1736

COVENANT PLACE OF SUMTER (INC)

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 70****Resident Beds: 70 Resident Rooms: 61****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CUMMINGS COMMUNITY RESIDENTIAL CARE HOME**

2606 STARK LN

NORTH CHARLESTON, SC 29405-5537 FACILITY #:843-747-7088

CUMMINGS, OLYMPIA W PH#: 843-860-2340

Facility Email: OCUMMINGS03@COMCAST.NET

Fac. Cont. Email: OCUMMINGS03@COMCAST.NET

CRC-0891 / 10/31/2014

Charleston / Sole Proprietorship

CUMMINGS, OLYMPIA W

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****CURAMENG RESIDENTIAL HOME CARE**

2021 COSGROVE AVE

NORTH CHARLESTON, SC 29405-7710 FACILITY #:843-566-1266

REYES, MILAGROS L PH#: 843-566-1266

Facility Email: CURAMEFT@YAHOO.COM

Fac. Cont. Email: CURAMEFT@YAHOO.COM

CRC-1187 / 11/30/2014

Charleston / Corporation

2021 COSGROVE AVE

NORTH CHARLESTON, SC 29405-7710

JFJ INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 3****Staff Beds: 2 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CYPRESS PLACE

205 MIDLAND PKWY
SUMMERVILLE, SC 29485-8104 FACILITY #:843-875-7163
DOLLASON, KRISTEN PH#:
Facility Email: K GALAS@ALCCO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1411 / 11/30/2014
Dorchester / Limited Liability
330 N WABASH AVE STE 3700
CHICAGO, IL 60611-7605
CYPRESS AID OPCO LLC

Alzheimer Care: Yes **Max # Residents: 4**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 44
Resident Beds: 44 **Resident Rooms: 39**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

DALTONS CMC RESIDENTIAL CARE FACILITY

1231 EUTAW ST
ORANGEBURG, SC 29115-3529 FACILITY #:803-531-6534
SANDS, GERRICK S PH#: 803-531-6534
Facility Email: CHERYLGDALTON@GMAIL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1447 / 07/31/2014
Orangeburg / Sole Proprietorship
1231 EUTAW ST
ORANGEBURG, SC 29115-3529
CHERYL GIBSON-DALTON

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

DAVIDSON STREET COMMUNITY RESIDENCE

313 DAVIDSON ST
CLINTON, SC 29325-2023 FACILITY #:864-833-7284
MERCER, PHYLLIS D PH#: 864-984-3506
Facility Email: DMERCER@LCDSNB.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1420 / 12/31/2014
Laurens / Non-Profit Corporation

LAURENS COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

DAVIS COMMUNITY CARE HOME

2306 HEYWARD BROCKINGTON RD
COLUMBIA, SC 29203-9679 FACILITY #:803-754-5677
HARVEY, ALTHEA PH#: 803-754-5677
Facility Email: DAVISEUGENIA@GMAIL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0240 / 07/31/2014
Richland / Partnership
PO BOX 3273
COLUMBIA, SC 29230-3273
THOMASENA DAVIS EUGENIA M EARGLE & ELIJAH DAVIS

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 19
Resident Beds: 19 **Resident Rooms: 8**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

DAYSPRING ASSISTED LIVING

5146 TOWLES RD
HOLLYWOOD, SC 29449-6119 FACILITY #:843-889-9757
MARSHALL, YASSAMIN B PH#: 843-889-9757
Facility Email: YASSIMARSHALL@YAHOO.COM
Fac. Cont. Email: DAYSPRINGSC@YAHOO.COM

CRC-1385 / 04/30/2014 (Renewal Pending)
Charleston / Ltd. Liability
5146 TOWLES RD
HOLLYWOOD, SC 29449-6119
DAYSPRING ASSISTED LIVING LLC

Alzheimer Care: Yes **Max # Residents: 16**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 16
Resident Beds: 16 **Resident Rooms: 12**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

DILLON COMMUNITY RESIDENCE

506 S 14TH AVE
DILLON, SC 29536-4369 FACILITY #:843-841-0778
MITCHELL, MARCELLA A PH#: 843-774-6775
Facility Email: GKEITH@MDDSN.ORG
Fac. Cont. Email: GKEITH@MDDSN.ORG

CRC-1377 / 04/30/2015
Dillon / County
PO BOX 2072
DILLON, SC 29536-2072
MARION-DILLON COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 4**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

DILLON POINTE ASSISTED LIVING & MEMORY CARE

104 DILLON DR
SPARTANBURG, SC 29307-1018 FACILITY #:864-948-9300
BLAIR, SUSAN S PH#: 864-948-9300
Facility Email: ED@DILLONPOINTE.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0893 / 06/30/2014
Spartanburg / Limited Liability
104 DILLON DR
SPARTANBURG, SC 29307-1018
DILLON DRIVE ASSISTED LIVING LLC

Alzheimer Care: Yes **Max # Residents: 13**
Alzheimer Unit: Yes **Max # Beds: 20**

Total Number of Licensed Beds: 55
Resident Beds: 55 **Resident Rooms: 36**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

DIVINE MANOR ASSISTED LIVING CENTER

2210 OAK POND RD
ROCK HILL, SC 29730-7958 FACILITY #:803-329-4494
AFAM, DORIS O PH#: 864-591-2222
Facility Email: CLIFFAFAM@AOL.COM
Fac. Cont. Email: DIVINEMANOR@COMPORIUM.NET

CRC-1361 / 07/31/2014
York / Limited Liability
2210 OAK POND RD
ROCK HILL, SC 29730-7958
DIVINE NURSE CONSULTANT LLC

Alzheimer Care: Yes **Max # Residents: 4**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 32
Resident Beds: 32 **Resident Rooms: 16**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

DIXON'S COMMUNITY CARE HOME

1456 DIXON RD

ELGIN, SC 29045-9030 FACILITY #:803-729-4309

DIXON, JAMES M PH#: 803-729-4309

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0934 / 09/30/2014

Kershaw / Corporation

PO BOX 306

ELGIN, SC 29045-0306

DIXON'S COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 4****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****DORCAS RESIDENTIAL CARE I**

1131 BEXLEY ST

NORTH CHARLESTON, SC 29405-4726 FACILITY #:843-746-9800

RELLORA, WILHELMINA C PH#: 843-746-9800

Facility Email: JNAVEARELLORA@NETZERO.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1251 / 11/30/2014

Charleston / Partnership

PO BOX 61870

NORTH CHARLESTON, SC 29419-1870

JESUS N AND WILHELMINA C RELLORA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 2****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****DORCAS RESIDENTIAL CARE II**

1133 BEXLEY ST

NORTH CHARLESTON, SC 29405-4726 FACILITY #:843-747-4800

RELLORA, WILHELMINA C PH#: 843-746-9800

Facility Email: JNAVEARELLORA@NETZERO.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1252 / 11/30/2014

Charleston / Partnership

PO BOX 61870

NORTH CHARLESTON, SC 29419-1870

JESUS N AND WILHELMINA C RELLORA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****DORCH COMMUNITY RESIDENTIAL CARE**

3955 GREELEYVILLE HWY

MANNING, SC 29102-6000 FACILITY #:803-473-4681

DORCH-MINGER, ROXIE PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1078 / 04/30/2015

Clarendon / Partnership

PO BOX 122

MANNING, SC 29102-0122

EVELYN DORCH LEWIS AND ANDREW DORCH

Alzheimer Care: Yes Max # Residents: 3**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 13****Resident Beds: 13 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

DOWDY'S COMMUNITY CARE HOME #2

4609 ARLINGTON ST
COLUMBIA, SC 29203-4143 FACILITY #:803-786-2105
DOWDY, ANNIE R PH#: 803-786-2105
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0173 / 08/31/2014
Richland / Sole Proprietorship
4609 ARLINGTON ST
COLUMBIA, SC 29203-4143
ANNIE R DOWDY

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 9
Resident Beds: 9 Resident Rooms: 4
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

DREAMLAND RESIDENTIAL CARE

6941 NORTH RD
NORTH, SC 29112-8832 FACILITY #:803-533-7492
WRIGHT, DELORES M PH#: 803-533-7492
Facility Email: DELORESWRIGHT4@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0795 / 12/31/2014
Orangeburg / Sole Proprietorship
6941 NORTH RD
NORTH, SC 29112-8832
DELORES M WRIGHT

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 5
Resident Beds: 5 Resident Rooms: 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EASLEY RETIREMENT CENTER

102 DOWLING ST
EASLEY, SC 29640-2424 FACILITY #:864-859-3722
OWENS, BERT J PH#: 864-859-3722
Facility Email: SARAFOSTER@EASLEYRETIREMENT.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0359 / 02/28/2015
Pickens / Corporation
PO BOX 736
EASLEY, SC 29641-0736
WEST END RETIREMENT CENTER

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 28
Resident Beds: 28 Resident Rooms: 11
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EASY LIVING

506 E JACKSON ST
LAMAR, SC 29069-9162 FACILITY #:843-326-5884
SMITH, SANDRA S PH#: 843-326-5884
Facility Email: No Facility Email on Record
Fac. Cont. Email: SANDYSHAWSMITH@AOL.COM

CRC-1512 / 03/31/2015
Darlington / Sole Proprietorship
PO BOX 85
LAMAR, SC 29069-0085
GEORGE, EDELL

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 5
Resident Beds: 5 Resident Rooms: 5
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

EDEN TERRACE OF SPARTANBURG

2780 E MAIN ST
SPARTANBURG, SC 29307-1248 FACILITY #:864-579-7387
HUGHES, CINDY B PH#: 864-579-7387
Facility Email: CHUGHES@ARBORCOMPANY.COM
Fac. Cont. Email: CWATSON@ARBORCOMPANY.COM

CRC-1213 / 05/31/2014 (Renewal Pending)
Spartanburg / Ltd. Liability
2780 E MAIN ST
SPARTANBURG, SC 29307
BRISTOL SPARTANBURG LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: Yes **Max # Beds: 48**

Total Number of Licensed Beds: 140
Resident Beds: 140 **Resident Rooms: 111**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

ELLIOTT'S RESIDENTIAL CARE HOME

2432 LANDSDOWNE RD
BOWMAN, SC 29018-9583 FACILITY #:803-829-3348
LEVINS, DEBORAH Y PH#: 803-829-3348
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0272 / 10/31/2014
Orangeburg / Corporation
PO BOX 265
BOWMAN, SC 29018-0265
ELLIOTT'S RESIDENTIAL CARE HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 7
Resident Beds: 7 **Resident Rooms: 3**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

ELMCROFT OF FLORENCE

3006 HOFFMEYER RD
FLORENCE, SC 29501-7551 FACILITY #:843-292-0012
ADEIMY, GINGER S PH#: 843-292-0012
Facility Email: RBARBER@ELMCROFTSENIORLIVING.COM
Fac. Cont. Email: GADEIMY@SENIORCARE-CORP.COM

CRC-1422 / 10/31/2014
Florence / Ltd. Liability
9510 ORMSBY STATION RD STE 101
LOUISVILLE, KY 40223-4082
EC FLORENCE OPERATIONS LLC

Alzheimer Care: Yes **Max # Residents: 38**
Alzheimer Unit: Yes **Max # Beds: 38**

Total Number of Licensed Beds: 82
Resident Beds: 82 **Resident Rooms: 78**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERALD GARDENS OF GREENWOOD

201 OVERLAND DR
GREENWOOD, SC 29646-4097 FACILITY #:864-953-2174
PATTERSON, MICHAEL L PH#: 864-953-2174
Facility Email: MPATTERSON@PREMIERSL.COM
Fac. Cont. Email: MPATTERSON@PREMIERS1.COM

CRC-1378 / 10/31/2014
Greenwood / Ltd. Liability
201 OVERLAND DR
GREENWOOD, SC 29646-4097
EMERALD GARDENS OF GREENWOOD LLC

Alzheimer Care: Yes **Max # Residents: 16**
Alzheimer Unit: Yes **Max # Beds: 16**

Total Number of Licensed Beds: 66
Resident Beds: 66 **Resident Rooms: 48**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

EMERALD RCF I

2244 BROWNTOWN RD
BISHOPVILLE, SC 29010-9664 FACILITY #:803-428-5407
FORTUNE, ELLA R PH#: 803-428-5407
Facility Email: ERF03@SCDMH.ORG
Fac. Cont. Email: ERF03@SCDMH.ORG

CRC-1205 / 04/30/2015
Lee / State
2244 BROWNTOWN RD
BISHOPVILLE, SC 29010-9664
SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 5**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERALD RCF II

2262 BROWNTOWN RD
BISHOPVILLE, SC 29010-9664 FACILITY #:803-428-5407
FORTUNE, ELLA R PH#: 803-428-6044
Facility Email: ERF03@SCDMH.ORG
Fac. Cont. Email: TTHLL@DMH.STATE.SC.US

CRC-1206 / 04/30/2015
Lee / State
2262 BROWNTOWN RD
BISHOPVILLE, SC 29010-9664
SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 5**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERITUS AT ANDERSON PLACE

311 SIMPSON RD
ANDERSON, SC 29621-2157 FACILITY #:864-261-3875
SEXTON, JAMI PH#: 864-261-3875
Facility Email: ANDERSONPLACE-ED@EMERTUS.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1303 / 03/31/2015
Anderson / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 40
Resident Beds: 40 **Resident Rooms: 30**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERITUS AT BELLAIRE PLACE

23 SOUTHPOINTE DR
GREENVILLE, SC 29607-5956 FACILITY #:864-675-0220
MORRISON, KENNETH SCOTT PH#: 864-675-0220
Facility Email: BELLAIREPLACE-ED@EMERITUSCOM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1335 / 09/30/2014
Greenville / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimer Care: Yes **Max # Residents: 10**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 162
Resident Beds: 162 **Resident Rooms: 82**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

EMERITUS AT CONWAY PLACE

872 SINGLETON RIDGE RD
CONWAY, SC 29526-9166 FACILITY #:843-347-3050
BUNTING, ROBIN E PH#: 843-347-3050
Facility Email: CONWAYPLACE-ED@EMERITUS.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1204 / 12/31/2014
Horry / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 52
Resident Beds: 52 **Resident Rooms: 42**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERITUS AT COUNTRYSIDE PARK

125 ZION SCHOOL RD
EASLEY, SC 29642-2833 FACILITY #:864-859-4684
HESS, HEATHER L PH#: 864-859-4684
Facility Email: COUNTRYSIDEPARK-ED@EMERITUS.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0858 / 01/31/2015
Pickens / Corporation
125 ZION SCHOOL RD
EASLEY, SC 29642-2833
EMERITUS CORPORATION

Alzheimer Care: Yes **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 66
Resident Beds: 66 **Resident Rooms: 46**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERITUS AT COUNTRYSIDE VILLAGE

706 PELZER HWY
EASLEY, SC 29642-2941 FACILITY #:864-859-0167
HESS, HEATHER L PH#: 864-859-4684
Facility Email: COUNTRYSIDEVILLAGE-ED@EMERITUS.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0857 / 01/31/2015
Pickens / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimer Care: Yes **Max # Residents: 16**
Alzheimer Unit: Yes **Max # Beds: 16**

Total Number of Licensed Beds: 85
Resident Beds: 85 **Resident Rooms: 56**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERITUS AT GREENVILLE ASSISTED LIVING

1306 PELHAM RD OFC
GREENVILLE, SC 29615-3661 FACILITY #:864-286-6600
BARRESI, TIMOTHY J PH#: 864-582-6838
Facility Email: GREENVILLE-ED@EMERITUS.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1140 / 10/31/2014
Greenville / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimer Care: Yes **Max # Residents: 25**
Alzheimer Unit: Yes **Max # Beds: 26**

Total Number of Licensed Beds: 119
Resident Beds: 119 **Resident Rooms: 82**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

EMERITUS AT HAWTHORNE INN AT GREENVILLE

20 HAWTHORNE PARK CT
GREENVILLE, SC 29615-3194 FACILITY #:864-288-6775
THOMAS, AMY S PH#: 864-591-1116
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1396 / 08/31/2014
Greenville / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimer Care: Yes **Max # Residents: 17**
Alzheimer Unit: Yes **Max # Beds: 17**

Total Number of Licensed Beds: 68
Resident Beds: 68 **Resident Rooms: 52**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERITUS AT HAWTHORNE INN AT HILTON HEAD

15 MAIN ST
HILTON HEAD ISLAND, SC 29926-4604 FACILITY #:843-342-6565
MARSHALL, PETER C PH#: 843-689-9143
Facility Email: HILTONHEAD-ED@EMERITUS.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1397 / 08/31/2014
Beaufort / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 51
Resident Beds: 51 **Resident Rooms: 39**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERITUS AT LAUREL GARDENS

1938 MOUNTAIN LAUREL CT
FLORENCE, SC 29505-6084 FACILITY #:843-665-7978
OWENS, ALICIA B PH#: 843-665-7978
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1387 / 08/31/2014
Florence / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimer Care: Yes **Max # Residents: 13**
Alzheimer Unit: Yes **Max # Beds: 13**

Total Number of Licensed Beds: 90
Resident Beds: 90 **Resident Rooms: 71**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

EMERITUS AT LEXINGTON GARDEN

190 MCSWAIN DR
WEST COLUMBIA, SC 29169-4825 FACILITY #:803-936-0062
PEPPER, CHRIS PH#:
Facility Email: LEXINGTONGARDENS-ED@EMERITUS.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1386 / 08/31/2014
Lexington / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 90
Resident Beds: 90 **Resident Rooms: 70**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

EMERITUS AT PALM COURT

48 MAIN ST

HILTON HEAD ISLAND, SC 29926-1647 FACILITY #:843-342-7122

BEST, LORENA K PH#: 843-342-7122

Facility Email: PALMMEADOWSCOURT-ED@EMERITUS.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1275 / 08/31/2014

Beaufort / Corporation

3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032

EMERITUS CORPORATION

Alzheimer Care: Yes Max # Residents: 36**Alzheimer Unit: Yes Max # Beds: 36****Total Number of Licensed Beds: 36****Resident Beds: 36 Resident Rooms: 32****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****EMERITUS AT PALM VILLAGE**

80 MAIN ST OFC 100

HILTON HEAD ISLAND, SC 29926-2923 FACILITY #:843-689-9143

HERNDON, ADAM W PH#:

Facility Email: PALMVILLAGE-ED@EMERITUS.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1276 / 08/31/2014

Beaufort / Corporation

3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032

EMERITUS CORPORATION

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 52****Resident Beds: 52 Resident Rooms: 42****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****EMERITUS AT SKYLYN PLACE**

1705 SKYLYN DR OFC

SPARTANBURG, SC 29307-1090 FACILITY #:864-582-6838

TIM, BARRESI PH#:

Facility Email: SKYLYN-ED@EMERITUS.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0856 / 01/31/2015

Spartanburg / Corporation

3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032

EMERITUS CORPORATION

Alzheimer Care: Yes Max # Residents: 20**Alzheimer Unit: Yes Max # Beds: 20****Total Number of Licensed Beds: 169****Resident Beds: 169 Resident Rooms: 115****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****EMERITUS AT SPRING ARBOR**

1800 INDIA HOOK RD

ROCK HILL, SC 29732-1933 FACILITY #:803-325-1144

MULLINS, TAMMY L PH#: 803-325-1144

Facility Email: SPRINGARBOR-ED@EMERITUS.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1392 / 08/31/2014

York / Corporation

3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032

EMERITUS CORPORATION

Alzheimer Care: Yes Max # Residents: 20**Alzheimer Unit: Yes Max # Beds: 20****Total Number of Licensed Beds: 92****Resident Beds: 92 Resident Rooms: 52****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

EUGENIA'S RESIDENTIAL CARE FACILITY

2232 HEYWARD BROCKINGTON RD
COLUMBIA, SC 29203-9677 FACILITY #:803-786-1047
DAVIS-EARGLE, EUGENIA M PH#: 803-786-0011
Facility Email: DAVIS_EUGINIAS@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0538 / 08/31/2014
Richland / Partnership
PO BOX 3273
COLUMBIA, SC 29230-3273
ELIJAH DAVIS THOMASENA DAVIS & EUGENIA M EARGLE

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 23
Resident Beds: 23 Resident Rooms: 13
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EVELYN'S RESIDENTIAL CARE FACILITY

162 S MCQUEEN ST
FLORENCE, SC 29501-4439 FACILITY #:843-665-5751
HOWARD, MARGARET P PH#: 843-665-5751
Facility Email: MPHRRVAS.MH@GMAIL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1164 / 05/31/2014 (Renewal Pending)
Florence / Sole Proprietorship
PO BOX 5846
FLORENCE, SC 29502-5846
EVELYN R CUSAAC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 9
Resident Beds: 9 Resident Rooms: 6
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EVERGREEN RESIDENTIAL CARE INC I

1612 EVERGREEN ST
CHARLESTON, SC 29407-6263 FACILITY #:843-744-1249
LESENE, CLARA P PH#: 843-744-1249
Facility Email: EVERGREEN_1818@HOTMAIL.COM
Fac. Cont. Email: EVERGREEN1818@MSN.COM

CRC-0026 / 03/31/2015
Charleston / Corporation
PO BOX 31774
CHARLESTON, SC 29417-1774
EVERGREEN RESIDENTIAL CARE INC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

FAITH HOPE AND CHARITY RETIREMENT

101 COE ST
ANDERSON, SC 29624 FACILITY #:864-226-0990
PH#:
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0760 / 04/30/2015
Anderson / Sole Proprietorship
PO BOX 13866
ANDERSON, SC 29624-0018
MARY SIMS TOUCHTON

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 10
Resident Beds: 10 Resident Rooms: 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

FAMILY RESIDENTIAL CARE HOME I

21 EDWARDS ST
SUMTER, SC 29150-4808 FACILITY #:803-775-9555
WALTERS, MICHAEL A PH#: 803-775-9555
Facility Email: FAMILYRCH1N2@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1233 / 02/28/2015
Sumter / Sole Proprietorship
21 EDWARDS ST
SUMTER, SC 29150-4808
WALTERS, MICHAEL A

Alzheimer Care: Yes **Max # Residents: 3**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 2**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

FAMILY RESIDENTIAL CARE HOME II

23 EDWARDS ST
SUMTER, SC 29150-4808 FACILITY #:803-775-9555
WALTERS, MICHAEL A PH#: 803-775-9555
Facility Email: FAMILYRCH1N2@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1277 / 06/30/2014
Sumter / Sole Proprietorship
23 EDWARDS ST
SUMTER, SC 29150-4808
WALTERS, MICHAEL A

Alzheimer Care: Yes **Max # Residents: 3**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 2**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

FAMILY RESIDENTIAL CARE HOME III

25 EDWARDS ST
SUMTER, SC 29150-4808 FACILITY #:803-775-9555
WILLIAMS, TRACEY L PH#: 803-775-9555
Facility Email: TWRG32@YAHOO.COM
Fac. Cont. Email: TRACEW90@AOL.COM

CRC-1537 / 02/28/2015
Sumter / Sole Proprietorship
25 EDWARDS ST
SUMTER, SC 29150-4808
WALTERS, MICHAEL A

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 5**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

FARMINGTON COMMUNITY RESIDENCE

1269 CAMP RD
JAMES ISLAND, SC 29412-9212 FACILITY #:843-805-5820
CAPERS, MADLYN PH#: 843-805-5820
Facility Email: DGOLDMINTZ@DSNCC.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1370 / 01/31/2015
Charleston / State
PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNT
CHARLESTON, SC 29413-2708
DISABILITIES BOARD OF CHARLESTON COUNTY

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

FIRST CHOICE HOME CARE FACILITY

2003 COSGROVE AVE

NORTH CHARLESTON, SC 29405-5702 FACILITY #:843-225-0637

RELLORA, WILHELMINA C PH#: 843-566-0460

Facility Email: AMABROUK23@COMCAST.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0742 / 10/31/2014

Charleston / Partnership

2003 COSGROVE AVE

NORTH CHARLESTON, SC 29405-5702

DQR CAMBA/NM CAMBA/GT MARTINEZ/P MARTINEZ/P PAJOTA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****FLANAGAN COMMUNITY CARE HOME**

665 SHARPE RD

COLUMBIA, SC 29203-9304 FACILITY #:803-754-2136

BRIGGS, MARY E PH#: 803-754-2136

Facility Email: MARYBRIGGS1@AOL.COM

Fac. Cont. Email: M-BRIGGS@BELLSOUTH.NET

CRC-0314 / 09/30/2014

Richland / Sole Proprietorship

BRIGGS, MARY E

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 9****Resident Beds: 9 Resident Rooms: 4****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****FLORA'S RESIDENTIAL CARE FACILITY II**

703 S HARVIN ST

SUMTER, SC 29150-6415 FACILITY #:803-775-6077

YORK-HERRIOTT, LUCINDA PH#: 803-316-8591

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1519 / 12/31/2014

Sumter / Sole Proprietorship

YORK-HERRIOTT, LUCINDA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****FLOWERS COMMUNITY RESIDENTIAL CARE**

1930 CHANEY ST

COLUMBIA, SC 29204-1632 FACILITY #:803-735-0920

FLOWERS, THEODORE PH#: 803-735-0920

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0376 / 03/31/2015

Richland / Sole Proprietorship

1930 CHANEY ST

COLUMBIA, SC 29204-1632

THEODORE FLOWERS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 11****Resident Beds: 11 Resident Rooms: 6****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

FLOWERS RESIDENTIAL CARE FACILITY

855 WATTS HILL RD

LUGOFF, SC 29078-9234 FACILITY #:803-438-2654

FLOWERS, MARY C PH#: 803-438-2654

Facility Email: MFLOW79255@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0297 / 11/30/2014

Kershaw / Sole Proprietorship

855 WATTS HILL RD

LUGOFF, SC 29078-9234

MARY C FLOWERS

Alzheimer Care: Yes Max # Residents: 2**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 7****Resident Beds: 7 Resident Rooms: 4****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****FOOTHILLS ASSISTED LIVING**

999 W UNION RD

WEST UNION, SC 29696-2642 FACILITY #:864-638-4370

STEWART, VIRGINIA B PH#: 864-638-4370

Facility Email: FOOTHILLSMANOR@YAHOO.COM

Fac. Cont. Email: FOOTHILLSMANOR@YAHOO.COM

CRC-1364 / 08/31/2014

Oconee / Corporation

106 MARLEE CT

LEXINGTON, SC 29072-8492

CITE HEALTH MANAGEMENT SERVICES INC

Alzheimer Care: Yes Max # Residents: 18**Alzheimer Unit: Yes Max # Beds: 20****Total Number of Licensed Beds: 76****Resident Beds: 76 Resident Rooms: 39****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****FOR A SEASON ASSISTED LIVING**

927 E NORTH 1ST ST

SENECA, SC 29678-2829 FACILITY #:864-886-0083

ARNOLD, MARTHA B PH#: 864-886-0083

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1230 / 12/31/2014

Oconee / Corporation

927 E NORTH 1ST ST

SENECA, SC 29678-2829

JAMES ARNOLD STEVENS INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 5****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****FOREST CIRCLE COMMUNITY RESIDENCE**

505 FOREST CIR

WALTERBORO, SC 29488-2869 FACILITY #:843-549-8140

SISK, DARRIN PH#: 843-549-1732

Facility Email: DREDD@COLLETONDSN.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1527 / 09/30/2014

Colleton /

COLLETON COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 8****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

FOREST VIEW MANOR RETIREMENT CENTER

141 CALLISON HWY

MCCORMICK, SC 29835-3524 FACILITY #:864-443-5857

NIXON, KENNETH M PH#: 803-637-5857

Facility Email: KMNIXON62@AOL.COM

Fac. Cont. Email: KMNIXON62@AOL.COM

CRC-0500 / 11/30/2014

Edgefield / Corporation

141 CALLISON HWY

MCCORMICK, SC 29835-3524

HILLSIDE INC

Alzheimer Care: Yes Max # Residents: 3**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 40****Resident Beds: 40 Resident Rooms: 27****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****FRANKE HOME**

1885 RIFLE RANGE RD

MOUNT PLEASANT, SC 29464-9440 FACILITY #:843-856-4700

STOLL, SANDRA A PH#: 843-856-4700

Facility Email: SSTOLL@FRANKEATSEASIDE.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1082 / 09/30/2014

Charleston / Non-Profit Corporation

1885 RIFLE RANGE RD

MOUNT PLEASANT, SC 29464-9440

LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

Alzheimer Care: Yes Max # Residents: 22**Alzheimer Unit: Yes Max # Beds: 22****Total Number of Licensed Beds: 86****Resident Beds: 86 Resident Rooms: 62****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****FRIENDSHIP COMMUNITY CARE HOME**

298 DOBY ST

CAMDEN, SC 29020-2312 FACILITY #:803-432-5329

LAWSON, GEOFFREY PH#: 843-382-4223

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0107 / 10/31/2012 (Renewal Pending)

Kershaw / Sole Proprietorship

298 DOBY ST

CAMDEN, SC 29020-2312

SHIRLEY D CAMPBELL-JENKINS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 7****Resident Beds: 7 Resident Rooms: 4****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****GARDEN HOUSE**

201 EDGEBROOK DR

ANDERSON, SC 29621-2573 FACILITY #:864-964-5668

BRADLEY-GUIBAULT, KATHLEEN PH#: 864-964-5668

Facility Email: DIRECTOR@GARDENHOUSE.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1437 / 07/31/2014

Anderson / Ltd. Liability

201 EDGEBROOK DR

ANDERSON, SC 29621-2545

ARHC GHANDSC01 TRS LLC

Alzheimer Care: Yes Max # Residents: 18**Alzheimer Unit: Yes Max # Beds: 18****Total Number of Licensed Beds: 75****Resident Beds: 75 Resident Rooms: 64****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

GARDENS AT EASTSIDE

275 COMMONWEALTH DR
GREENVILLE, SC 29615-4814 FACILITY #:864-329-1200
FORD, JANE A PH#: 864-329-1200
Facility Email: JFORD@ARBORCOMPANY.COM
Fac. Cont. Email: JHARPER@ARBORCOMPANY.COM

CRC-1222 / 08/31/2014
Greenville / Ltd. Liability
275 COMMONWEALTH DR
GREENVILLE, SC 29615-4814
EASTSIDE ASSISTED LIVING LLC

Alzheimer Care: Yes **Max # Residents: 14**
Alzheimer Unit: Yes **Max # Beds: 14**

Total Number of Licensed Beds: 83
Resident Beds: 83 **Resident Rooms: 71**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

GENE'S RESIDENTIAL CARE #1

607 W SUMTER ST
FLORENCE, SC 29501-2458 FACILITY #:843-662-2529
JONES, CASSIE T PH#: 843-662-2529
Facility Email: CAREGENE@BELLSOUTH.NET
Fac. Cont. Email: CAREGENE@BELLSOUTH.NET

CRC-0431 / 05/31/2014 (Renewal Pending)
Florence / Sole Proprietorship
PO BOX 15101
FLORENCE, SC 29506-0101
GENE E JONES

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 6
Resident Beds: 6 **Resident Rooms: 4**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

GENE'S RESIDENTIAL CARE FACILITY #2

2385 PAMPLICO HWY
FLORENCE, SC 29505-7515 FACILITY #:843-407-4580
JONES, GENE E PH#: 843-407-4580
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1479 / 06/30/2014
Florence / Corporation
PO BOX 15101
FLORENCE, SC 29506-0101
GENCASCO INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 47
Resident Beds: 47 **Resident Rooms: 33**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

GENE'S RESIDENTIAL CARE FACILITY #3

1312 W EVANS ST
FLORENCE, SC 29501-3324 FACILITY #:843-667-6636
JONES, CASSIE T PH#: 843-667-6636
Facility Email: CAREGENE@BELLSOUTH.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0482 / 02/28/2015
Florence / Sole Proprietorship
622 E MCIVER RD
FLORENCE, SC 29506-6919
GENE E JONES

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 4**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

GENERATIONS OF BATESBURG

111 GENERATIONS BLVD
BATESBURG, SC 29006-2315 FACILITY #:803-532-8428
NIX, HAMMIE R PH#: 803-532-8428
Facility Email: TODD@GENERATIONSOFFCHAPIN.COM
Fac. Cont. Email: TODD@GENERATIONSOFFCHAPIN.COM

CRC-0647 / 09/30/2014
Lexington / Corporation
111 GENERATIONS BLVD
BATESBURG, SC 29006-2315
GENERATIONS OF BATESBURG INC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 88
Resident Beds: 88 Resident Rooms: 58
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GENERATIONS OF CHAPIN

431 E BOUNDARY ST
CHAPIN, SC 29036-8388 FACILITY #:803-345-1911
SLICE, TIMOTHY H PH#: 803-345-1911
Facility Email: TODD@GENERATIONSOFFCHAPIN.COM
Fac. Cont. Email: TIM@GENERATIONSOFFCHAPIN.COM

CRC-1128 / 10/31/2014
Lexington / Corporation
431 E BOUNDARY ST
CHAPIN, SC 29036-8388
GENERATIONS OF CHAPIN INC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 64
Resident Beds: 64 Resident Rooms: 54
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GENERATIONS OF IRMO

7142 WOODROW ST
IRMO, SC 29063-2832 FACILITY #:803-227-8991
SLICE, LOUETTA A PH#: 803-345-1911
Facility Email: LOUETTA@GENERATIONSOFFCHAPIN.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1477 / 05/31/2015
Lexington / Limited Liability
7142 WOODROW ST
IRMO, SC 29063-2832
GENERATIONS OF IRMO LLC

Alzheimer Care: No Max # Residents: 6
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 78
Resident Beds: 78 Resident Rooms: 78
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GENERATIONS OF MONETTA

77 CATO RD
MONETTA, SC 29105-9319 FACILITY #:803-685-6156
WILLIAMS, RICK PH#:
Facility Email: TODD@GENERATIONSOFFCHAPIN.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0876 / 10/31/2014
Aiken / Ltd. Liability
PO BOX 96
MONETTA, SC 29105-0096
GENERATIONS OF MONETTA LLC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 22
Resident Beds: 22 Resident Rooms: 11
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

GOD'S HAVEN OF REST

516 BELVEDERE CLEARWATER RD
NORTH AUGUSTA, SC 29841-2583 FACILITY #:803-279-1129
AYERS, HAZEL L PH#: 803-279-1129
Facility Email: LEIGH.3@COMCAST.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1237 / 12/31/2014
Aiken / Sole Proprietorship
516 BELVEDERE CLEARWATER RD
NORTH AUGUSTA, SC 29841-2583
HAZEL LEIGH AYERS

Alzheimer Care: Yes **Max # Residents: 5**
Alzheimer Unit: Yes **Max # Beds: 5**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 5**
Staff Beds: 3 **Staff Rooms: 2**
Other Beds: 0 **Other Rooms: 0**

GOLDEN YEARS

139 SEMINOLE DR
ORANGEBURG, SC 29115-7619 FACILITY #:803-536-0060
SMITH-KELL, JIMI LYN PH#: 803-531-4386
Facility Email: JL333SMITHE@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0333 / 02/28/2015
Orangeburg / Sole Proprietorship
PO BOX 1465
ORANGEBURG, SC 29116-1465
KELL, JIMI LYN SMITH

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 15
Resident Beds: 15 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

GOOD SAMARITAN RESIDENTIAL CARE

1356 BUBZY RD
KINGSTREE, SC 29556-5246 FACILITY #:843-382-3530
DUROUSSEAU, MATTIE H PH#: 843-382-3530
Facility Email: DCM42@SCDMH.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1015 / 05/31/2015
Williamsburg / Corporation
1356 BUBZY RD
KINGSTREE, SC 29556-5246
GOOD SAMARITAN RESIDENTIAL CARE FACILITY INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 3**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

GOOSE CREEK MANOR #1

104 MARILYN ST
GOOSE CREEK, SC 29445-3104 FACILITY #:843-572-7442
DEDIOS, LETICIA G PH#: 843-572-7442
Facility Email: GOOSECREEKMANOR@AOL.COM
Fac. Cont. Email: GOOSECREEKMANOR@AOL.COM

CRC-0639 / 06/30/2014
Berkeley / Corporation
104 MARILYN ST
GOOSE CREEK, SC 29445-3104
NL & JR INCORPORATED

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 7
Resident Beds: 7 **Resident Rooms: 4**
Staff Beds: 2 **Staff Rooms: 2**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

GOOSE CREEK MANOR #2

104 MARILYN ST

GOOSE CREEK, SC 29445-3104 FACILITY #:843-572-7442

DEDIOS, LETICIA G PH#: 843-572-7442

Facility Email: GOOSECREEKMANOR@AOL.COM

Fac. Cont. Email: GOOSECREEKMANOR@AOL.COM

CRC-0762 / 04/30/2015

Berkeley / Corporation

104 MARILYN ST

GOOSE CREEK, SC 29445-3104

NL & JR INCORPORATED

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 36****Resident Beds: 36 Resident Rooms: 16****Staff Beds: 2 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****GRACE RESIDENTIAL CARE FACILITY**

PO BOX 326

DENMARK, SC 29042 FACILITY #:803-793-3423

DAVIS, BERNESTINE C PH#: 803-793-3423

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0584 / 08/31/2014

Bamberg / Corporation

PO BOX 326

DENMARK, SC 29042-0326

GRACE RESIDENTIAL CARE FACILITY INC

Alzheimer Care: Yes Max # Residents: 5**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 22****Resident Beds: 22 Resident Rooms: 9****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****GREENE'S RESIDENTIAL CARE FACILITY**

23 KENDRICK ST

SUMTER, SC 29150-5224 FACILITY #:803-778-2780

GREENE, CARL PH#: 803-778-2780

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0665 / 01/31/2015

Sumter / Partnership

142 PERKINS AVE

SUMTER, SC 29150-6829

CARL AND SHIRLEY GREENE

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 21****Resident Beds: 21 Resident Rooms: 9****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****GREENE'S RESIDENTIAL CARE II**

28 S MAGNOLIA ST

SUMTER, SC 29150-5243 FACILITY #:803-934-6030

GREENE, CARL PH#: 803-778-2780

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1126 / 10/31/2014

Sumter / Sole Proprietorship

142 PERKINS AVE

SUMTER, SC 29150-6829

GREENE, CARL

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 12****Resident Beds: 12 Resident Rooms: 5****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

GREENVILLE COMMUNITY RESIDENCE

158 CAVALIER DR
GREENVILLE, SC 29607-4262 FACILITY #:864-277-9656
WOJACK, DAVID C PH#: 864-277-0584
Facility Email: GREENVILLECRCF@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0073 / 03/31/2015
Greenville / Sole Proprietorship

LAND, CELIA T

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 12
Resident Beds: 12 **Resident Rooms: 12**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

GREENVILLE GLEN

1101 GARLINGTON RD
GREENVILLE, SC 29615-5446 FACILITY #:864-627-8700
CONNELLY, REATHA L PH#: 864-627-8700
Facility Email: ED@GREENVILLEGLEN.COM
Fac. Cont. Email: MANNINGHOUSE@ALCCO.COM

CRC-0887 / 04/30/2015
Greenville / Limited Liability
1101 GARLINGTON RD
GREENVILLE, SC 29615-5446
GREENVILLE GLEN ASSISTED LIVING LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 44
Resident Beds: 44 **Resident Rooms: 36**
Staff Beds: 3 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

GREENVILLE PLACE

2006 PELHAM RD
GREENVILLE, SC 29615-4005 FACILITY #:864-288-3331
PIZZOLA, KITTY J PH#: 864-288-3331
Facility Email: KPIZZOLA@GREENVILLEPLACE.BIZ
Fac. Cont. Email: GPED@CHARTERINTERNET.COM

CRC-1402 / 11/30/2014
Greenville / Corporation
2006 PELHAM RD
GREENVILLE, SC 29615-4005
CSL LEASECO INC

Alzheimer Care: Yes **Max # Residents: 53**
Alzheimer Unit: Yes **Max # Beds: 53**

Total Number of Licensed Beds: 153
Resident Beds: 153 **Resident Rooms: 86**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

GREER COMMUNITY RESIDENCE

112 S BEVERLY LN
GREER, SC 29651-1738 FACILITY #:864-879-8570
MORTON, TAMARA L PH#: 864-879-8570
Facility Email: TMORTON.GCDSNB@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0237 / 09/30/2014
Greenville / State
PO BOX 17467
GREENVILLE, SC 29606-8467
GREENVILLE COUNTY DISABILITIES & SPECIAL NEEDS BOARD

Alzheimer Care: Yes **Max # Residents: 2**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 12
Resident Beds: 12 **Resident Rooms: 12**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

GREGORY'S COMMUNITY CARE #5 - MALONE HOUSE

2413 FORK SHOALS RD

PIEDMONT, SC 29673-8663 FACILITY #:864-299-0716

GREGORY, JOYCE C PH#: 864-277-2269

Facility Email: JCGREGORY6@AOL.COM

Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

CRC-0558 / 01/31/2015

Greenville / Sole Proprietorship

PO BOX 637

SIMPSONVILLE, SC 29681-0637

JOYCE C GREGORY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****GREGORY'S COMMUNITY CARE #6 - HOWELL HOUSE**

2409 FORK SHOALS RD

PIEDMONT, SC 29673-8663 FACILITY #:864-299-0716

GREGORY, JOYCE C PH#: 864-277-1852

Facility Email: JCGREGORY6@AOL.COM

Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

CRC-0556 / 01/31/2015

Greenville / Sole Proprietorship

PO BOX 637

SIMPSONVILLE, SC 29681-0637

JOYCE C GREGORY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****GREGORY'S COMMUNITY CARE #7 - CRAVEN HOUSE**

10 FERGUSON RD

PIEDMONT, SC 29673-8603 FACILITY #:864-299-0716

GREGORY, JOYCE C PH#: 864-277-0996

Facility Email: JCGREGORY6@AOL.COM

Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

CRC-0555 / 01/31/2015

Greenville / Sole Proprietorship

PO BOX 637

SIMPSONVILLE, SC 29681-0637

JOYCE C GREGORY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****GREGORY'S COMMUNITY CARE #8 - METZ HOUSE**

18 FERGUSON RD

PIEDMONT, SC 29673-8603 FACILITY #:864-299-0716

GREGORY, JOYCE C PH#: 864-277-8506

Facility Email: LGRIKARD@HOTMAIL.COM

Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

CRC-0557 / 01/31/2015

Greenville / Sole Proprietorship

PO BOX 637

SIMPSONVILLE, SC 29681-0637

JOYCE C GREGORY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

GUARDIAN ANGELS RESIDENTIAL CARE

2126 SUCCESS ST

NORTH CHARLESTON, SC 29405-7992 FACILITY #:843-744-0448

JANKE, BONIFACIA E PH#: 843-744-0448

Facility Email: BARRY.JANKE@YAHOO.COM

Fac. Cont. Email: BIGB1959@COMCAST.NET

CRC-1049 / 11/30/2014

Charleston / Corporation

2126 SUCCESS ST

NORTH CHARLESTON, SC 29405-7992

GUARDIAN ANGELS ASSISTED LIVING INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 18****Resident Beds: 18 Resident Rooms: 6****Staff Beds: 2 Staff Rooms: 2****Other Beds: 0 Other Rooms: 0****HAMMOND PLACE**

128 WALNUT LN

NORTH AUGUSTA, SC 29860-9206 FACILITY #:803-441-8441

PH#:

Facility Email: MSHELLS@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1405 / 11/30/2014

Aiken /

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

HAMMOND AID OPOC LLC

Alzheimer Care: No Max # Residents: 5**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 39****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HAMPTON STREET COMMUNITY RESIDENCE**

425 HAMPTON ST

DENMARK, SC 29042-1368 FACILITY #:803-793-5003

JAMES, GLORIA M PH#: 803-793-5003

Facility Email: GLORIAJ_29059@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1296 / 06/30/2014

Bamberg /

BAMBERG COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HANNAH RESIDENTIAL MANOR**

3750 SHEMINALLY RD

PAMPLICO, SC 29583-5700 FACILITY #:843-493-0001

HART, PATRICIA W PH#: 843-493-2398

Facility Email: HANNARM1993@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0712 / 05/31/2013 (Renewal Pending)

Florence / Limited Liability

3750 SHEMINALLY RD

PAMPLICO, SC 29583-5700

HART'S RENTAL MANAGEMENT COMPANY LLC

Alzheimer Care: Yes Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 48****Resident Beds: 48 Resident Rooms: 15****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

HARBISON HALL

534 WIL STEL RD

COLUMBIA, SC 29210-3967 FACILITY #:803-731-2000

EVANS, JOSEPH A PH#: 803-731-2000

Facility Email: BRIANHHCOOK@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1107 / 06/30/2014

Richland / Partnership

534 WIL STEL RD

COLUMBIA, SC 29210-3967

HARBISON HALL PARTNERS

Alzheimer Care: Yes Max # Residents: 40**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 40****Resident Beds: 40 Resident Rooms: 26****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HARBORCHASE OF AIKEN**

1385 SILVER BLUFF RD

AIKEN, SC 29803-8860 FACILITY #:803-642-8444

SMOLA, HEIDI L PH#: 803-642-8444

Facility Email: HSOMOLA@HRAONLINE.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1316 / 11/30/2014

Aiken / Corporation

1385 SILVER BLUFF RD

AIKEN, SC 29803-8860

TWENTY TWO PACK MANAGEMENT CORPORATION

Alzheimer Care: Yes Max # Residents: 29**Alzheimer Unit: Yes Max # Beds: 29****Total Number of Licensed Beds: 110****Resident Beds: 110 Resident Rooms: 72****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HARBORCHASE OF COLUMBIA**

120 FAIRFOREST RD

COLUMBIA, SC 29212-2308 FACILITY #:803-781-2243

MORRILL, MARY S PH#: 803-781-2243

Facility Email: MMORRILL@HRAONLINE.NET

Fac. Cont. Email: ADMIN@THEMORRILLALTERNATIVE.COM

CRC-1315 / 11/30/2014

Richland / Corporation

120 FAIRFOREST RD

COLUMBIA, SC 29212-2308

TWENTY TWO PACK MANAGEMENT CORPORATION

Alzheimer Care: Yes Max # Residents: 14**Alzheimer Unit: Yes Max # Beds: 14****Total Number of Licensed Beds: 66****Resident Beds: 66 Resident Rooms: 61****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HARBORCHASE OF ROCK HILL**

1611 CONSTITUTION BLVD

ROCK HILL, SC 29732-3047 FACILITY #:803-981-6855

STOREY, KATHLEEN B PH#: 803-981-6855

Facility Email: KSTOREY@HRAONLINE.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1290 / 11/30/2014

York / Corporation

1611 CONSTITUTION BLVD

ROCK HILL, SC 29732-3047

TWENTY TWO PACK MANAGEMENT CORPORATION

Alzheimer Care: Yes Max # Residents: 34**Alzheimer Unit: Yes Max # Beds: 34****Total Number of Licensed Beds: 110****Resident Beds: 110 Resident Rooms: 72****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

HARMONY HOUSE RESIDENTIAL CARE

704 ANDERSON ST

CALHOUN FALLS, SC 29628-1034 FACILITY #:864-418-9277

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1511 / 05/31/2014 (Renewal Pending)

Abbeville / Limited Liability

704 ANDERSON ST

CALHOUN FALLS, SC 29628-1034

HERRON CARE LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 17****Resident Beds: 17 Resident Rooms: 9****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HAVEN IN THE SUMMIT**

3 SUMMIT TER

COLUMBIA, SC 29229-7639 FACILITY #:803-788-4633

TYSON, GARY MARK PH#: 843-884-7977

Facility Email: GTYSON@5SQC.COM

Fac. Cont. Email: GTYSON@SANDPIPERCENTER.COM

CRC-1240 / 03/31/2015

Richland / Limited Liability Limited Partnership

400 CENTRE ST

NEWTON, MA 02458-2094

MORNINGSIDE OF ANDERSON LP

Alzheimer Care: Yes Max # Residents: 60**Alzheimer Unit: Yes Max # Beds: 60****Total Number of Licensed Beds: 60****Resident Beds: 60 Resident Rooms: 48****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HAVEN IN THE VILLAGE AT CHANTICLEER**

355 BERKMANS LN

GREENVILLE, SC 29605-5606 FACILITY #:864-467-0031

SMITH, CATRINA L PH#: 864-497-0031

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1244 / 11/30/2014

Greenville / Limited Liability Limited Partnership

MORNINGSIDE OF ANDERSON LP

Alzheimer Care: Yes Max # Residents: 60**Alzheimer Unit: Yes Max # Beds: 60****Total Number of Licensed Beds: 60****Resident Beds: 60 Resident Rooms: 48****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HEARTLAND HEALTH CARE CENTER-UNION (RESIDENTIAL CARE)**

709 RICE AVE EXT

UNION, SC 29379-9023 FACILITY #:864-427-0306

FREEMAN, PATRICIA A PH#: 864-427-0306

Facility Email: 4031ADMIN@HCR-MANORCARE.COM

Fac. Cont. Email: 4031-ADMIN@HCR-MANORCARE.COM

CRC-0576 / 12/31/2014

Union / Limited Liability

709 RICE AVE EXT

UNION, SC 29379-9023

OAKMONT OF UNION SC LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 40****Resident Beds: 40 Resident Rooms: 32****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

HEATH SPRINGS RESIDENTIAL CARE CENTER

614 HART ST

HEATH SPRINGS, SC 29058-8411 FACILITY #:803-273-3227

BARNES, SUSAN PH#: 803-273-3227

Facility Email: HSRCC@COMPORIUM.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0761 / 04/30/2015

Lancaster / Corporation

PO BOX 503

HEATH SPRINGS, SC 29058-0503

HEATH SPRINGS RESIDENTIAL CARE CENTER INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 64****Resident Beds: 64 Resident Rooms: 43****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HELENA PLACE**

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605 FACILITY #:843-982-0233

FENNELL, ERIC J PH#: 843-982-0233

Facility Email: EFENNELL@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1409 / 11/30/2014

Out of State /

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

HELENA AID OPCO LLC

Alzheimer Care: Yes Max # Residents: 4**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 39****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HELMS-GORDON RESIDENTIAL CARE HOME**

714 FUNDERBURKE RD

FORT LAWN, SC 29714-8593 FACILITY #:803-872-4253

GORDON, MELISSA K PH#: 803-872-4253

Facility Email: MKGORDON@COMPORIUM.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0527 / 07/31/2014

Chester / Sole Proprietorship

PO BOX 188

FORT LAWN, SC 29714-0188

MELISSA, KAYE GORDON

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 32****Resident Beds: 32 Resident Rooms: 16****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HERITAGE AT LOWMAN RESIDENTIAL CARE**

2101 DUTCH FORK RD

CHAPIN, SC 29036 FACILITY #:803-732-8800

YETTER, MELISSA T PH#: 803-732-8800

Facility Email: MYETTER@LHOMES.ORG

Fac. Cont. Email: MYETTER@LHOMES.ORG

CRC-0840 / 09/30/2014

Richland / Non-Profit Corporation

PO BOX 444

WHITE ROCK, SC 29177-0444

LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

Alzheimer Care: Yes Max # Residents: 48**Alzheimer Unit: Yes Max # Beds: 48****Total Number of Licensed Beds: 132****Resident Beds: 132 Resident Rooms: 132****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

HERRIOTT'S RESIDENTIAL CARE FACILITY

114 LIME LN

SUMTER, SC 29150-6630 FACILITY #:803-773-6882

YORK-HERRIOTT, LUCINDA PH#: 803-773-6882

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1013 / 06/30/2014

Sumter / Partnership

114 LIME LN

SUMTER, SC 29150-6630

JOHN & LUCINDA HERRIOTT

Alzheimer Care: Yes Max # Residents: 2**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 14****Resident Beds: 14 Resident Rooms: 7****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HILL COMMUNITY CARE FACILITY**

1529 DIXON RD

ELGIN, SC 29045-8957 FACILITY #:803-408-1346

HILL, ALICE F PH#: 803-408-1346

Facility Email: CFB1920@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1152 / 04/30/2015

Kershaw / Sole Proprietorship

2326 LOCUST RD

COLUMBIA, SC 29223-3835

ALICE F HILL

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HILLS OF CUMBERLAND VILLAGE**

3215 WISE CREEK LN

AIKEN, SC 29801-2534 FACILITY #:803-641-8444

NEAL, ELIZABETH H PH#: 803-641-8444

Facility Email: LNEAL@MARRINSON.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1121 / 09/30/2014

Aiken / Corporation

3215 WISE CREEK LN

AIKEN, SC 29801-2534

MARRINSON GROUP INC

Alzheimer Care: Yes Max # Residents: 4**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 34****Resident Beds: 34 Resident Rooms: 24****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****HITCHCOCK PLACE**

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605 FACILITY #:803-649-6439

SARAH, LEVASSEUR PH#:

Facility Email: FDRAWDY@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1412 / 11/30/2014

Out of State /

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

HITCHCOCK AID OPCO LLC

Alzheimer Care: Yes Max # Residents: 4**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 39****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

HOMEWOOD RESIDENCE AT CLEVELAND PARK

12 BOYCE AVE
GREENVILLE, SC 29601-3110 FACILITY #:864-250-1188
KRUGER, JESSICA L PH#: 864-223-2281
Facility Email: MQUINNT@BROOKDALELIVING.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1398 / 07/31/2014
Greenville / Ltd. Liability
12 BOYCE AVE
GREENVILLE, SC 29601-3110
ARC CLEVELAND PARK LLC

Alzheimer Care: Yes **Max # Residents: 17**
Alzheimer Unit: Yes **Max # Beds: 17**

Total Number of Licensed Beds: 115
Resident Beds: 115 **Resident Rooms: 92**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

HORIZON BAY ASSISTED LIVING & MEMORY CARE AT CHARLESTON

2030 CHARLIE HALL BLVD
CHARLESTON, SC 29414-5830 FACILITY #:843-763-4055
PH#:
Facility Email: TROBINSON1@BROOKDALELIVING.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1291 / 09/30/2014
Charleston / Limited Liability
2030 CHARLIE HALL BLVD
CHARLESTON, SC 29414-5830
HBP LEASECO LLC

Alzheimer Care: Yes **Max # Residents: 29**
Alzheimer Unit: Yes **Max # Beds: 33**

Total Number of Licensed Beds: 100
Resident Beds: 100 **Resident Rooms: 84**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

HOUSE ON CHARLOTTE

442 E CHARLOTTE AVE
SUMTER, SC 29150-3670 FACILITY #:803-883-4046
BURGESS, GLORIA F PH#: 803-883-4046
Facility Email: SENIORS@LIFELINESENIORSERVICES.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1531 / 12/31/2014
Sumter / Corporation

LIFELINE SENIOR SERVICES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 4
Resident Beds: 4 **Resident Rooms: 2**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

IDA LANE I CRCF

120 IDA LN
COLUMBIA, SC 29203-9234 FACILITY #:803-786-7522
HARRIS, BRENDA R PH#: 803-799-1970
Facility Email: BHARRIS@BABCOCKCENTER.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1520 / 03/31/2015
Richland /

BABCOCK CENTER INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

IDA LANE II CRCF

124 IDA LN
COLUMBIA, SC 29203-9234 FACILITY #:803-786-7543
HARRIS, BRENDA R PH#: 803-799-1970
Facility Email: BHARRIS@BABCOCKCENTER.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1518 / 12/31/2014
Richland /

BABCOCK CENTER INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

IVORY'S LOVING CARE RESIDENTIAL FACILITY

2827 SPRUILL AVE
NORTH CHARLESTON, SC 29405-8050 FACILITY #:843-745-2339
SANDERS, JUANITA PH#: 843-270-0787
Facility Email: SISTERSANDERS@KNOLOGY.NET
Fac. Cont. Email: SISTERSANDERS@BELLSOUTH.NET

CRC-1383 / 04/30/2014 (Renewal Pending)
Charleston / Partnership
2827 SPRUILL AVE
NORTH CHARLESTON, SC 29405-8050
JUANITA SANDERS & GENEVA NELSON

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 7
Resident Beds: 7 **Resident Rooms: 4**
Staff Beds: 2 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

IVY GROVE RESIDENTIAL CARE CENTER

483 LOCKHART LN
GAFFNEY, SC 29341-2841 FACILITY #:864-487-0869
MELEKWE, OBIAJULU E PH#: 864-487-0869
Facility Email: OSKARMANI@AOL.COM
Fac. Cont. Email: OSKARMANI@AOL.COM

CRC-1458 / 10/31/2014
Cherokee / Ltd. Liability
483 LOCKHART LN
GAFFNEY, SC 29341-2841
HARMONY RESIDENTIAL CARE CENTER LLC

Alzheimer Care: Yes **Max # Residents: 10**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 62
Resident Beds: 62 **Resident Rooms: 34**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

J & T RESIDENTIAL CARE FACILITY

604 WAGON WHEEL RD
HAMPTON, SC 29924-5346 FACILITY #:803-943-7177
HAMILTON, DA'ASIA S PH#: 803-943-7177
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1094 / 05/31/2015
Hampton / Sole Proprietorship
604 WAGON WHEEL RD
HAMPTON, SC 29924-5346
THELMA S MYERS

Alzheimer Care: Yes **Max # Residents: 10**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 6**
Staff Beds: 3 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

J C LARAES SOUTHWINDS ASSISTED LIVING COMMUNITY
308 HUMPHRIES RD
RIDGEWAY, SC 29130-9648 FACILITY #:803-438-4052
OWENS, JUDY W PH#: 803-438-4052
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1181 / 09/30/2014
Kershaw / Sole Proprietorship
PO BOX 1382
LUGOFF, SC 29078-1382
ANNA L OWENS

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 5**
Staff Beds: 2 **Staff Rooms: 2**
Other Beds: 0 **Other Rooms: 0**

J J RESIDENTIAL CARE
748 GREEN ST
ORANGEBURG, SC 29115-4805 FACILITY #:803-539-2604
IRICK-BRUNSON, BARBARA W PH#: 803-539-2604
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0831 / 09/30/2014
Orangeburg / Sole Proprietorship
PO BOX 204
ORANGEBURG, SC 29116-0204
BARBARA W IRICK-BRUNSON

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 4**
Staff Beds: 1 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

JADE COMMUNITY RESIDENTIAL CARE
3 CUNNINGTON AVE
NORTH CHARLESTON, SC 29405-9312 FACILITY #:843-853-0299
VELASCO, JULIA M PH#: 843-853-0299
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1123 / 10/31/2014
Charleston / Ltd. Liability
PO BOX 612
UNION, SC 29379-0612
JADE COMMUNITY RESIDENTIAL CARE LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 6**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

JADE COMMUNITY RESIDENTIAL CARE II
7 CUNNINGTON AVE
NORTH CHARLESTON, SC 29405-9312 FACILITY #:843-853-0299
WASHINGTON, ALFREDA PH#: 843-853-0299
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1124 / 10/31/2014
Charleston / Ltd. Liability
PO BOX 612
UNION, SC 29379-0612
JADE COMMUNITY RESIDENTIAL CARE LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 4**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

JADE COMMUNITY RESIDENTIAL CARE III

9 CUNNINGTON AVE

NORTH CHARLESTON, SC 29405-9312 FACILITY #:843-853-0299

WASHINGTON, ALFREDA PH#: 843-853-0299

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1125 / 10/31/2014

Charleston / Ltd. Liability

PO BOX 612

UNION, SC 29379-0612

JADE COMMUNITY RESIDENTIAL CARE LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 12****Resident Beds: 12 Resident Rooms: 5****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****JENNI-LYNN ASSISTED LIVING COMMUNITY**

915 HOOK AVE

WEST COLUMBIA, SC 29169-5332 FACILITY #:803-926-8600

THOMPSON, GREGORY E PH#: 803-926-8600

Facility Email: ATOWERY@JENNILYNNSENIORLIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1248 / 09/30/2014

Lexington / Ltd. Liability

915 HOOK AVE

WEST COLUMBIA, SC 29169-5332

JENNI-LYNN ASSISTED LIVING LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 63****Resident Beds: 63 Resident Rooms: 53****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****JESSAMINE COMMUNITY RESIDENCE**

143 JESSAMINE AVE

GEORGETOWN, SC 29440-5837 FACILITY #:843-527-1390

RANDOLPH, STACEY PH#: 843-527-1390

Facility Email: SANTLEY@GCBDSN.COM

Fac. Cont. Email: SANTLEY@GCBDSN.COM

CRC-1445 / 06/30/2014

Georgetown / County

PO BOX 1471

GEORGETOWN, SC 29442-1471

GEORGETOWN COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****JOANNE'S COMMUNITY CARE HOME #1**

5048 PERCIVAL RD

ELGIN, SC 29045-9156 FACILITY #:803-736-3860

CALDWELL, JOANNE M PH#: 803-736-3860

Facility Email: JOANNESCCH@AOL.COM

Fac. Cont. Email: JOANNESCCH@AOL.COM

CRC-0932 / 06/30/2014

Richland / Sole Proprietorship

PO BOX 23494

COLUMBIA, SC 29224-3494

JOANNE M CALDWELL

Alzheimer Care: Yes Max # Residents: 2**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

JOANNE'S COMMUNITY CARE HOME II

756 FARROWOOD DR
COLUMBIA, SC 29223-7801 FACILITY #:803-736-3094
PH#:

Facility Email: JOANNESCCH@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0030 / 03/31/2015
Richland / Sole Proprietorship
PO BOX 23494
COLUMBIA, SC 29224-3494
JOANNE M CALDWELL

Alzheimer Care: Yes **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 5**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

JOHNSONVILLE ADULT CARE SERVICES

351 S MIDWAY HWY
JOHNSONVILLE, SC 29555-6242 FACILITY #:843-380-0777
ROBINSON, RHONDA H PH#: 843-380-0777

Facility Email: JADC2011@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1530 / 12/20/2014
Florence / Ltd. Liability
PO BOX 1118
JOHNSONVILLE, SC 29555-1118
JOHNSONVILLE ADULT CARE SERVICES LLC

Alzheimer Care: Yes **Max # Residents: 3**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 22
Resident Beds: 22 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

JOLLY REST MORE

1488 GLOVER ST
ORANGEBURG, SC 29115-6095 FACILITY #:803-531-4386
MOORE, DAVENE M PH#: 803-531-4386

Facility Email: JOLLYRESTMORE@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0332 / 11/30/2014
Orangeburg / Sole Proprietorship
PO BOX 1465
ORANGEBURG, SC 29116-1465
LYNN P SMITH

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 3**
Staff Beds: 4 **Staff Rooms: 3**
Other Beds: 0 **Other Rooms: 0**

JOSHUAS FOUNDATION

388 ELBOW CIR
RIDGEWAY, SC 29130 FACILITY #:803-337-8701
WOOD, EDNA S PH#: 803-337-8701

Facility Email: RIDEDNA@TRUVISTA.COM

Fac. Cont. Email: RIDEDNA@TRUVISTA.NET

CRC-0659 / 03/31/2015
Fairfield / Non-Profit Corporation
PO BOX 159
RIDGEWAY, SC 29130-0159
JOSHUA'S FOUNDATION INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 20
Resident Beds: 20 **Resident Rooms: 12**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

JOSIE DRIVE COMMUNITY RESIDENCE

210 JOSIE DR

WALTERBORO, SC 29488-2791 FACILITY #:843-549-6979

SISK, DARRIN W PH#: 843-549-1732

Facility Email: DREDD@COLLETONDSN.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1528 / 09/30/2014

Colleton /

COLLETON COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****JOY COMMUNITY CARE HOME**

6800 DOBY DR

COLUMBIA, SC 29203-5133 FACILITY #:803-754-3157

DOUGLAS, JONATHAN PH#: 803-754-3157

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0961 / 11/30/2014

Richland / Sole Proprietorship

PO BOX 25215

COLUMBIA, SC 29224-5215

DEBORAH A SCOTT

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 4****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****JOY'S RESIDENTIAL CARE FACILITY**

294 HWY 28 BYP

ABBEVILLE, SC 29620-5541 FACILITY #:864-302-9202

PH#:

Facility Email: JOYT2007@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1098 / 06/30/2014

Abbeville / Corporation

294 HWY 28 BYP

ABBEVILLE, SC 29620-5541

ABBEVILLE RESIDENTIAL CARE FACILITY INC

Alzheimer Care: Yes Max # Residents: 5**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****KENSINGTON I**

100 KENSINGTON RD

COLUMBIA, SC 29203-5451 FACILITY #:843-623-9016

RICHARDS, ANGELA PH#: 803-256-0504

Facility Email: No Facility Email on Record

Fac. Cont. Email: CWRIGHT@BABCOCKCENTER.ORG

CRC-1532 / 06/30/2014

Richland / County

CHESCO SERVICES

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 0****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

KENSINGTON II GROUP HOME

120 KENSINGTON RD
COLUMBIA, SC 29203-5451 FACILITY #:843-623-9016

TURNER, SUSAN PH#:

Facility Email: T.ROGERS@CHESCOSERVICES.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1536 / 11/30/2014

Richland / State

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Alzheimer Care: No **Max # Residents: 0**

Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8

Resident Beds: 8 **Resident Rooms: 0**

Staff Beds: 0 **Staff Rooms: 0**

Other Beds: 0 **Other Rooms: 0**

KIVA LODGE

200 CLAUDE BUNDRICK RD
BLYTHEWOOD, SC 29016-9420 FACILITY #:803-754-5478

HUNTER, KIMBERLY M PH#: 803-359-4259

Facility Email: JJAY@MHA-SC.ORG

Fac. Cont. Email: JJAY@MHA-SC.ORG

CRC-1092 / 07/31/2014

Richland / Corporation

1823 GADSDEN ST

COLUMBIA, SC 29201-2344

MENTAL HEALTH AMERICA OF SOUTH CAROLINA

Alzheimer Care: No **Max # Residents: 0**

Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5

Resident Beds: 5 **Resident Rooms: 5**

Staff Beds: 0 **Staff Rooms: 0**

Other Beds: 0 **Other Rooms: 0**

L & B CARE HOME

924 BARR WOODS RD
SALUDA, SC 29138-8191 FACILITY #:864-445-2494

BLEDSON, LESA L PH#: 864-445-2494

Facility Email: LBCAREHOME@EMBARQMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0530 / 07/31/2014

Saluda / Partnership

924 BARR WOODS RD

SALUDA, SC 29138-8191

LESA L BLEDSOE & FAYE LONG

Alzheimer Care: No **Max # Residents: 0**

Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 24

Resident Beds: 24 **Resident Rooms: 10**

Staff Beds: 3 **Staff Rooms: 2**

Other Beds: 0 **Other Rooms: 0**

L & M RESIDENTIAL HEALTH CARE FACILITY

2504 HWY 311
CROSS, SC 29436-3339 FACILITY #:843-753-7098

TAYLOR, LINDA B PH#: 843-753-7098

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1426 / 02/28/2015

Berkeley / Ltd. Liability

2504 HWY 311

CROSS, SC 29436-3339

L & M RESIDENTIAL HCF LLC

Alzheimer Care: No **Max # Residents: 0**

Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5

Resident Beds: 5 **Resident Rooms: 5**

Staff Beds: 0 **Staff Rooms: 0**

Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

LADIES COMMUNITY RESIDENCE

408 WEBB ST

CONWAY, SC 29527-5842 FACILITY #:843-349-7271

SANTANGELO, ANGELA PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1449 / 07/31/2014

Horry / County

408 WEBB ST

CONWAY, SC 29527-5842

HORRY COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****LADSON'S RESIDENTIAL HOME CARE**

1116 CAMP RD

CHARLESTON, SC 29412-8831 FACILITY #:843-762-6443

LADSON, PAULINE M PH#: 843-406-0775

Facility Email: PAULINELADSON@ATT.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1256 / 09/30/2014

Charleston / Sole Proprietorship

1116 CAMP RD

CHARLESTON, SC 29412-8831

PAULINE LADSON

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 2 Staff Rooms: 2****Other Beds: 0 Other Rooms: 0****LAFORREST COMMUNITY CARE CENTER**

2841 BYPASS 127

LAURENS, SC 29360-8332 FACILITY #:864-984-8001

MCDANIEL, SHEILA L PH#: 864-984-8001

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0681 / 05/31/2015

Laurens / Corporation

PO BOX 27

LAURENS, SC 29360-0027

LAFORREST COMMUNITY CARE CENTER INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 34****Resident Beds: 34 Resident Rooms: 16****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****LAKE WYLIE ASSISTED LIVING COMMUNITY**

4877 CHARLOTTE HWY

CLOVER, SC 29710-8096 FACILITY #:803-831-9900

MCCUIN, KRISTI E PH#: 803-366-1189

Facility Email: SMOFFITT@SENIORLIFESTYLE.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1241 / 01/31/2015

York / Limited Liability

4877 CHARLOTTE HWY

CLOVER, SC 29710-8096

LSREF GOLDEN OPS 14 (SC) LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 110****Resident Beds: 110 Resident Rooms: 100****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

LAKES AT LITCHFIELD ASSISTED LIVING

120 LAKES AT LITCHFIELD DR

PAWLEYS ISLAND, SC 29585-5515 FACILITY #:843-235-9393

RICHARDSON, JACQUE W PH#: 843-235-9393

Facility Email: JRICARDSON@LAKES-LITCHFIELD.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1116 / 08/31/2014

Georgetown / Ltd. Liability

38 LAKES AT LITCHFIELD DR

PAWLEYS ISLAND, SC 29585-5768

LITCHFIELD RETIREMENT LLC

Alzheimer Care: Yes Max # Residents: 11**Alzheimer Unit: Yes Max # Beds: 11****Total Number of Licensed Beds: 79****Resident Beds: 79 Resident Rooms: 61****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****LAKEVIEW ASSISTED LIVING**

320 CAMP RD

WALHALLA, SC 29691-4811 FACILITY #:864-638-5212

STOVALL, SHARON D PH#: 864-638-5212

Facility Email: HARDY@SENIORSOLUTIONS-SC.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0086 / 04/30/2015

Oconee / Non-Profit Corporation

320 CAMP RD

WALHALLA, SC 29691-4811

LAKEVIEW ASSISTED LIVING INC

Alzheimer Care: Yes Max # Residents: 2**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 19****Resident Beds: 19 Resident Rooms: 14****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****LAMBS ROAD COMMUNITY RESIDENCE**

4788 LAMBS RD

NORTH CHARLESTON, SC 29418-3521 FACILITY #:843-767-1066

JOHNSTON, GLORIA J PH#: 843-767-1066

Facility Email: DGOLDMINTZ@DSNCC.COM

Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

CRC-0690 / 09/30/2014

Charleston / State

PO BOX 22708

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****LANDRUM COMMUNITY RESIDENCE I**

722 BOMAR AVE

LANDRUM, SC 29356 FACILITY #:864-585-0322

DENDY, BERNADETTE C PH#:

Facility Email: JBERNARD@CHARLESLEA.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1507 / 08/31/2014

Spartanburg / State

CHARLES LEA CENTER

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

LANDRUM COMMUNITY RESIDENCE II

722 BOMAR AVE

LANDRUM, SC 29356 FACILITY #:864-585-0322

DENDY, BERNADETTE C PH#:

Facility Email: JBERNARD@CHARLESLEA.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1508 / 08/31/2014

Spartanburg / State

CHARLES LEA CENTER

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****LANGIT'S ASSISTED LIVING FACILITY**

1273 REMOUNT RD

NORTH CHARLESTON, SC 29406-3439 FACILITY #:843-554-1671

LANGIT, CRESENCIA B PH#: 843-554-1671

Facility Email: LANGITSASSISTEDLIVING@COMCAST.NET

Fac. Cont. Email: LANGITSASSISTEDLIVING@COMCAST.NET

CRC-0861 / 03/31/2015

Charleston / Corporation

1273 REMOUNT RD

NORTH CHARLESTON, SC 29406-3439

LANGIT'S RESIDENTIAL HOME CARE INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 70****Resident Beds: 70 Resident Rooms: 35****Staff Beds: 6 Staff Rooms: 4****Other Beds: 0 Other Rooms: 0****LANGSTON PLACE**

939 SPRINGDALE DR

CLINTON, SC 29325-7266 FACILITY #:864-833-0338

MORGAN, MARY A PH#: 864-833-0386

Facility Email: MMORGAN@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1408 / 11/30/2014

Laurens /

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

LANGSTON AID OPCO LLC

Alzheimer Care: No Max # Residents: 4**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 39****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****LAUREL CREST**

100 JOSEPH WALKER DR

WEST COLUMBIA, SC 29169-6939 FACILITY #:803-796-0370

ROWLETTE-CARTER, CASSANDRA N PH#: 803-796-0370

Facility Email: S.BUKOSKEY@LAUREL-CRESTCOM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0829 / 09/30/2014

Lexington / Non-Profit Corporation

100 JOSEPH WALKER DR

WEST COLUMBIA, SC 29169-6939

FPCRC INC

Alzheimer Care: Yes Max # Residents: 6**Alzheimer Unit: Yes Max # Beds: 6****Total Number of Licensed Beds: 26****Resident Beds: 26 Resident Rooms: 22****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

LAURENS MEMORIAL HOME FOR AGED

3744 TORRINGTON RD
LAURENS, SC 29360-0638 FACILITY #:864-682-2322
PENLAND, CAROLYN B PH#: 864-682-2322
Facility Email: CPENLAND@PRTCNET.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0316 / 12/31/2014
Laurens / Non-Profit Corporation
PO BOX 638
LAURENS, SC 29360-0638
LAURENS MEMORIAL HOME FOR AGED INC

Alzheimer Care: Yes Max # Residents: 2
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 50
Resident Beds: 50 Resident Rooms: 43
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

LEMONAIDE HOUSE

1018 CRYSTAL CLEAR LN
HOPKINS, SC 29061-8237 FACILITY #:803-776-1742
ETHERIDGE, LULA J PH#: 803-776-1742
Facility Email: LEMONS2LOVE@AOL.COM
Fac. Cont. Email: LYMINAIDE@AOL.COM

CRC-0924 / 05/31/2014 (Renewal Pending)
Richland / Partnership
1018 CRYSTAL CLEAR LN
HOPKINS, SC 29061-8237
LULA J ETHERIDGE AND NANCY A SMITH

Alzheimer Care: Yes Max # Residents: 1
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 15
Resident Beds: 15 Resident Rooms: 7
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

LENEVAR COMMUNITY RESIDENCE

1435 W LENEVAR DR
CHARLESTON, SC 29407-5118 FACILITY #:843-766-3061
JOHNSTON, GLORIA J PH#: 843-766-3061
Facility Email: DGOLDMINTZ@DSNCC.COM
Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

CRC-0943 / 07/31/2014
Charleston / State
PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNT
CHARLESTON, SC 29413-2708
DISABILITIES BOARD OF CHARLESTON COUNTY

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

LOIS EARGLE HOME

406 WEBB ST
CONWAY, SC 29527-5842 FACILITY #:843-349-7272
SANTANGELO, ANGELA PH#:
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1450 / 07/31/2014
Horry / County
406 WEBB ST
CONWAY, SC 29527-5842
HORRY COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

LONG'S RESIDENTIAL CARE CENTER

1280 DENNY HWY
SALUDA, SC 29138-8972 FACILITY #:864-445-7901
LONG, MARY J PH#: 864-445-7901
Facility Email: LONGSRESIDENTIAL@YMAIL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0592 / 05/31/2014 (Renewal Pending)
Saluda / Corporation
1280 DENNY HWY
SALUDA, SC 29138-8972
LONG'S RESIDENTIAL CARE CENTER INC

Alzheimer Care: Yes **Max # Residents: 6**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 32
Resident Beds: 32 **Resident Rooms: 15**
Staff Beds: 2 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

LONGWOOD PLANTATION

1687 LONGWOOD DR
ORANGEBURG, SC 29118-2307 FACILITY #:803-535-0250
FOWLER, JOSEPH C PH#: 803-535-0250
Facility Email: CLAY.FOWLERHEALTHCAREENTERPRISE@GMAIL.CO
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0797 / 10/31/2014
Orangeburg / Limited Liability

Alzheimer Care: Yes **Max # Residents: 16**
Alzheimer Unit: Yes **Max # Beds: 16**

Total Number of Licensed Beds: 42
Resident Beds: 42 **Resident Rooms: 30**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

LOW COUNTRY ASSISTED LIVING

6060 EHRHARDT RD
EHRHARDT, SC 29081 FACILITY #:803-267-2222
HIERS, BARBARA M PH#: 803-267-2222
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1474 / 04/30/2015
Bamberg / Limited Liability
PO BOX 116
EHRHARDT, SC 29081-0116
LOW COUNTRY ASSISTED LIVING LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 5**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

LOW COUNTRY HOME

105 MCKNIGHT ST
MONCKS CORNER, SC 29461-4010 FACILITY #:843-899-6950
BEY, LAILA R PH#: 843-899-6950
Facility Email: LOWCOUNTRYASSISTEDLIVING@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1353 / 03/31/2015
Berkeley / Ltd. Liability
204 MENDENHALL ST
SUMMERVILLE, SC 29483-5288
RAINBOW RESIDENTIAL HOME LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

LOW COUNTRY HOME #2
1005 COOPER STORE RD
MONCKS CORNER, SC 29461-8317 FACILITY #:843-899-8385
BEY, LAILA R PH#: 843-873-1557
Facility Email: LBEYL@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1496 / 10/31/2014
Berkeley / Ltd. Liability

RAINBOW RESIDENTIAL HOME LLC

Alzheimer Care: Yes **Max # Residents: 2**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

M & M RESIDENTIAL CARE HOME
408 HOLIDAY ST
MARION, SC 29571-4416 FACILITY #:843-423-0120
PH#:
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1379 / 08/31/2014
Marion / Sole Proprietorship
PO BOX 6023
FLORENCE, SC 29502-6023
BURGESS, SANDI M

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MAGGIE MANOR
300 S 5TH ST
EASLEY, SC 29640-2828 FACILITY #:864-855-3957
BLIHAR, DEBRA PH#:
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0295 / 11/30/2014
Pickens / Corporation
200 S 5TH ST
EASLEY, SC 29640-2826
WEST END RETIREMENT CENTER

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 6**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MAGNOLIAS OF EASLEY
123 COUCH LN
EASLEY, SC 29642-1916 FACILITY #:864-859-3303
CINTRON, CONNIE S PH#: 864-859-3303
Facility Email: CCINTRON@MAGNOLIASEASLEY.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1274 / 03/31/2015
Pickens / Ltd. Liability
123 COUCH LN
EASLEY, SC 29642-1916
EASLEY RETIREMENT LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 56
Resident Beds: 56 **Resident Rooms: 50**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MAGNOLIAS OF GAFFNEY ASSISTED LIVING COMMUNITY

101 PARK CT

GAFFNEY, SC 29341 FACILITY #:864-206-0006

WISE, BONITA D PH#: 864-206-0006

Facility Email: BWISE@MAGNOLIASGAFFNEY.COM

Fac. Cont. Email: BWISE@MAGNOLIASGAFFNEY.COM

CRC-1281 / 06/30/2014

Cherokee / Ltd. Liability

GAFFNEY RETIREMENT LLC

Alzheimer Care: Yes Max # Residents: 24**Alzheimer Unit: Yes Max # Beds: 24****Total Number of Licensed Beds: 90****Resident Beds: 90 Resident Rooms: 62****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MAGNOLIAS OF MYRTLE BEACH**

601 65TH AVE N

MYRTLE BEACH, SC 29572-3532 FACILITY #:843-692-2330

GRAHAM, DENISE J PH#: 843-692-2330

Facility Email: DENISEJGRAHAM@YAHOO.COM

Fac. Cont. Email: DODENICNAT@YAHOO.COM

CRC-1415 / 05/31/2015

Horry / Ltd. Liability

6309 HAWTHORNE LN

MYRTLE BEACH, SC 29572-3255

CAROLINA RETIREMENT SERVICES OF MYRTLE BEACH LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 48****Resident Beds: 48 Resident Rooms: 37****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MAGNOLIAS OF SANTEE**

118 BRITAIN ST

SANTEE, SC 29142-8922 FACILITY #:803-854-2020

WILLIS, TAMMY S PH#: 803-854-2020

Facility Email: MAGNOLIAS.OFSANTEE@NTINET.COM

Fac. Cont. Email: MAGNOLIAS.OFSANTEE@NTINET.COM

CRC-1416 / 05/31/2015

Orangeburg / Ltd. Liability

118 BRITAIN ST

SANTEE, SC 29142-8922

CAROLINA RETIREMENT SERVICES OF SANTEE LLC

Alzheimer Care: Yes Max # Residents: 16**Alzheimer Unit: Yes Max # Beds: 16****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 31****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MAGNOLIAS OF SUMMERVILLE**

335 MIDLAND PKWY

SUMMERVILLE, SC 29485-8138 FACILITY #:843-821-4122

MEDEIROS, ANNETTE R PH#: 843-821-4122

Facility Email: ANNTTMED@YAHOO.COM

Fac. Cont. Email: TBRAZEN@BELLSOUTH.NET

CRC-1414 / 05/31/2014 (Renewal Pending)

Dorchester / Ltd. Liability

335 MIDLAND PKWY

SUMMERVILLE, SC 29485-8138

CAROLINA RETIREMENT SERVICES OF SUMMERVILLE LLC

Alzheimer Care: Yes Max # Residents: 5**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 60****Resident Beds: 60 Resident Rooms: 50****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MANNING PLACE

10 COMPANION CT

GREER, SC 29651-1288 FACILITY #:864-989-0707

DURRAH, SERINA M PH#: 864-989-0707

Facility Email: SDURRAH@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1407 / 11/30/2014

Greenville /

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

MANNING AID OPCO LLC

Alzheimer Care: No Max # Residents: 5**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 39****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MAPLES OF HONEA PATH**

224 WILDWOOD DR

HONEA PATH, SC 29654-1335 FACILITY #:864-369-2000

WILLIS, MARK N PH#: 864-369-2000

Facility Email: WILLISFORHOUSE@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0819 / 05/31/2015

Anderson / Corporation

224 WILDWOOD DR

HONEA PATH, SC 29654-1335

MAPLE MANOR INC

Alzheimer Care: Yes Max # Residents: 30**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 74****Resident Beds: 74 Resident Rooms: 50****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MARANATHA MANOR OF SPARTANBURG**

2902 E MAIN ST

SPARTANBURG, SC 29307-1252 FACILITY #:864-579-0086

MAHAFFEY, MARY K PH#: 864-579-0086

Facility Email: MAN0643@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1235 / 12/31/2014

Spartanburg / Corporation

2902 E MAIN ST

SPARTANBURG, SC 29307-1252

MARANATHA MANOR OF SPARTANBURG INC

Alzheimer Care: Yes Max # Residents: 22**Alzheimer Unit: Yes Max # Beds: 22****Total Number of Licensed Beds: 73****Resident Beds: 73 Resident Rooms: 47****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MARCHBANKS ASSISTED LIVING AND MEMORY CARE**

2203 MARCHBANKS AVE

ANDERSON, SC 29621-2247 FACILITY #:864-231-7786

STOVALL, SHARON D PH#: 864-638-5212

Facility Email: CYNTHIA@MARCHBANKSASSISTEDLIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1413 / 05/31/2014 (Renewal Pending)

Anderson / Ltd. Liability

2203 MARCHBANKS AVE

ANDERSON, SC 29621-2247

CAROLINA RETIREMENT SERVICES OF ANDERSON LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 60****Resident Beds: 60 Resident Rooms: 50****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MARETT BOULEVARD COMMUNITY RESIDENTIAL CARE FACILITY

1721 MARETT BLVD EXT

ROCK HILL, SC 29732-2040 FACILITY #:803-327-9466

MYERS, CHRISTINA L PH#: 803-327-9466

Facility Email: TARD@YORKDSNB.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0883 / 08/31/2014

York / Non-Profit Corporation

PO BOX 30, YORK COUNTY BOARD OF DSN

ROCK HILL, SC 29731-6030

YORK COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 8****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MARIA'S PRIORITY CARE RESIDENTIAL HOME I**

3117 MEETING STREET RD

NORTH CHARLESTON, SC 29405-7980 FACILITY #:843-554-8890

PARANAL, ROGERIA R PH#: 843-554-8890

Facility Email: RRPARANAL@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0937 / 07/31/2014

Charleston / Sole Proprietorship

3117 MEETING STREET RD

NORTH CHARLESTON, SC 29405-7980

PARANAL, ROGERIA R

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 7****Resident Beds: 7 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MARIA'S PRIORITY CARE RESIDENTIAL HOME II-B**

4583 DURANT AVE, B

NORTH CHARLESTON, SC 29405-5212 FACILITY #:843-566-9864

RELLORA, JESUS N PH#:

Facility Email: JNAVEARELLORA@NETZERO.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0772 / 06/30/2014

Charleston / Partnership

PO BOX 70037

CHARLESTON, SC 29415-0037

JESUS N AND WILHELMINA C RELLORA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 7****Resident Beds: 7 Resident Rooms: 2****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MARIA'S PRIORITY CARE RESIDENTIAL HOME II-E**

4583 DURANT AVE, E

NORTH CHARLESTON, SC 29405-5212 FACILITY #:843-566-0460

RELLORA, JESUS N PH#:

Facility Email: JNAVEARELLORA@NETZERO.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0773 / 06/30/2014

Charleston / Partnership

PO BOX 70037

CHARLESTON, SC 29415-0037

JESUS N AND WILHELMINA C RELLORA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 6****Resident Beds: 6 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MARIA'S PRIORITY CARE RESIDENTIAL HOME II-F

4583 DURANT AVE, F

NORTH CHARLESTON, SC 29405-5212 FACILITY #:843-747-9234

RELLORA, JESUS N PH#:

Facility Email: JNAVEARELLORA@NETZERO.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0774 / 06/30/2014

Charleston / Partnership

PO BOX 70037

CHARLESTON, SC 29415-0037

JESUS N AND WILHELMINA C RELLORA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****MARIA'S PRIORITY CARE RESIDENTIAL HOME III**

3115 MEETING STREET RD

NORTH CHARLESTON, SC 29405-7980 FACILITY #:843-554-0064

PARANAL, ROGERIA R PH#: 843-554-8890

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0938 / 07/31/2014

Charleston / Sole Proprietorship

3115 MEETING STREET RD

NORTH CHARLESTON, SC 29405-7980

PARANAL, ROGERIA R

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 7****Resident Beds: 7 Resident Rooms: 3****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****MARQUISE RESIDENTIAL HOME**

9 FRAZIER VILLAGE DR

BEAUFORT, SC 29906-7959 FACILITY #:843-846-8417

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0863 / 03/31/2015

Beaufort / Sole Proprietorship

9 FRAZIER VILLAGE DR

BEAUFORT, SC 29906-7959

MATTIE L HAYWARD

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 2 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****MARTHA FRANKS BAPTIST RETIREMENT COMMUNITY**

1 MARTHA FRANKS DR

LAURENS, SC 29360-1799 FACILITY #:864-984-4541

HAIR, DINA M PH#: 864-984-4541

Facility Email: PFRANKS@SCBMA.COM

Fac. Cont. Email: DHAIR@SCBMA.COM

CRC-0360 / 02/28/2015

Laurens / Non-Profit Corporation

1 MARTHA FRANKS DR

LAURENS, SC 29360-1799

SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 82****Resident Beds: 82 Resident Rooms: 81****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MARY'S HOME CARE

224 WARD LOOP

HEMINGWAY, SC 29554-3415 FACILITY #:843-558-9053

HOLMES, MARY W PH#: 843-546-1032

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1505 / 05/31/2015

Georgetown / Sole Proprietorship

HOLMES, MARY W

Alzheimer Care: Yes Max # Residents: 2**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 5****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MARY'S RESIDENTIAL #2**

633 SHARPE RD

COLUMBIA, SC 29203-9304 FACILITY #:803-556-9813

SIMMONS, NHAJIYAH RAHESSIA PH#: 803-754-3585

Facility Email: KATHY.MINGAS@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1534 / 08/31/2014

Richland / Sole Proprietorship

529 HUMBLE DR

COLUMBIA, SC 29223-5435

BACOTE, MARY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 2****Staff Beds: 2 Staff Rooms: 2****Other Beds: 0 Other Rooms: 0****MARY'S RESIDENTIAL CARE FACILITY**

10425 WILSON BLVD

BLYTHEWOOD, SC 29016-9017 FACILITY #:803-708-1739

SIMMONS, NHAJIYAH RAHESSIA PH#: 803-754-3585

Facility Email: M.BACOTE@HOTMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1501 / 01/31/2015

Richland / Sole Proprietorship

10425 WILSON BLVD

BLYTHEWOOD, SC 29016-9017

BACOTE, MARY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 4****Staff Beds: 2 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****MARYVILLE COMMUNITY RESIDENCE**

2602 OLD CHARLESTON RD

GEORGETOWN, SC 29440-1471 FACILITY #:843-546-7238

BAKER, DAVID B PH#: 843-546-8228

Facility Email: BLACKSHERANN@YAHOO.COM

Fac. Cont. Email: EKRAUSS@GCBDSN.COM

CRC-1446 / 06/30/2014

Georgetown / County

PO BOX 1471

GEORGETOWN, SC 29442-1471

GEORGETOWN COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MASTER CARE

5870 MOOREFIELD MEMORIAL HWY
LIBERTY, SC 29657-9268 FACILITY #:864-878-9926
MASTERS, JIMMY D PH#: 864-878-9926
Facility Email: MASTERCARE178@GMAIL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0358 / 02/28/2015
Pickens / Corporation
5870 MOOREFIELD MEMORIAL HWY
LIBERTY, SC 29657-9268
MASTER CARE INC

Alzheimer Care: Yes **Max # Residents: 1**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 14
Resident Beds: 14 **Resident Rooms: 9**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MCELVEEN MANOR

2065 MCCRAYS MILL RD
SUMTER, SC 29154-6111 FACILITY #:803-778-9690
BENSON, GINGER PH#:
Facility Email: MCELVEENMANOR@SC.RR.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0988 / 06/30/2014
Sumter / Corporation
2065 MCCRAYS MILL RD
SUMTER, SC 29154-6111
SUMTER AL HOLDINGS LLC

Alzheimer Care: Yes **Max # Residents: 56**
Alzheimer Unit: Yes **Max # Beds: 56**

Total Number of Licensed Beds: 140
Resident Beds: 140 **Resident Rooms: 96**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MCKINNEY HOUSE

307 MILLER RD
MAULDIN, SC 29662-2034 FACILITY #:864-297-5044
TATE, CRYSTAL PH#:
Facility Email: CLN95@SCDMH.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0778 / 07/31/2014
Greenville / State
307 MILLER RD
MAULDIN, SC 29662-2034
PIEDMONT CENTER FOR MENTAL HEALTH SERVICES

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 10**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MCLEOD MANOR

1707 MCLEOD AVE
CHARLESTON, SC 29412-2922 FACILITY #:843-795-8780
ALSTON, MARTHA S PH#: 843-795-8780
Facility Email: CHVINC@COMCAST.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0425 / 03/31/2015
Charleston / Corporation
1707 MCLEOD AVE
CHARLESTON, SC 29412-2922
MCLEOD MANOR INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 16
Resident Beds: 16 **Resident Rooms: 7**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MCMILLIANS COMMUNITY CARE HOME

5748 KNIGHTNER ST
COLUMBIA, SC 29203-3508 FACILITY #:803-754-7089
MCMILLIAN, KAREN B PH#: 803-754-7089
Facility Email: KMCML3806@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0971 / 01/31/2013 (Renewal Pending)
Richland / Sole Proprietorship
5748 KNIGHTNER ST
COLUMBIA, SC 29203-3508
KAREN MCMILLIAN

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 11
Resident Beds: 11 **Resident Rooms: 6**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MEADOWLARK DRIVE COMMUNITY RESIDENTIAL CARE FACILITY

1183 MEADOWLARK DR
ROCK HILL, SC 29732-7708 FACILITY #:803-327-9770
MYERS, CHRISTINA L PH#: 803-327-9466
Facility Email: CMYERS@YORKDSNB.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0881 / 08/31/2014
York / Non-Profit Corporation
PO BOX 30, YORK COUNTY BOARD OF DSN
ROCK HILL, SC 29731-6030
YORK COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

METHODIST OAKS RESIDENTIAL CARE FACILITY

1000 METHODIST OAKS DR
ORANGEBURG, SC 29115-1813 FACILITY #:803-534-1212
VALLENTINE, TERESA C PH#: 803-245-4321
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0910 / 05/31/2014 (Renewal Pending)
Orangeburg / Non-Profit Corporation
PO BOX 327
ORANGEBURG, SC 29116-0327
METHODIST OAKS INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 40
Resident Beds: 40 **Resident Rooms: 40**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MIDLAND PARK RESIDENTIAL HOME CARE

2712 MIDLAND PARK RD
NORTH CHARLESTON, SC 29406-4551 FACILITY #:843-569-0025
SINGIAN, ROGELIO C PH#: 843-569-0025
Facility Email: MIDLANDPARK@BELLSOUTH.NET
Fac. Cont. Email: RVBALAGTASSC@AOL.COM

CRC-0905 / 01/31/2015
Charleston / Corporation
2712 MIDLAND PARK RD
NORTH CHARLESTON, SC 29406-4551
MIDLAND PARK ENTERPRISES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 52
Resident Beds: 52 **Resident Rooms: 27**
Staff Beds: 4 **Staff Rooms: 2**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MIDWAY RESIDENTIAL CARE FACILITY #1

4026 MOORE DUNCAN HWY
MOORE, SC 29369-9721 FACILITY #:864-433-8777
GIBSON, STACEY R PH#:
Facility Email: LCWALKER428@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0318 / 12/31/2014
Spartanburg / Corporation
4026 MOORE DUNCAN HWY
MOORE, SC 29369-9721
MIDWAY RESIDENTIAL CARE FACILITY INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 13
Resident Beds: 13 **Resident Rooms: 7**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MIDWAY RESIDENTIAL CARE FACILITY #1A

4026 MOORE DUNCAN HWY
MOORE, SC 29369-9721 FACILITY #:864-433-8777
GIBSON, STACEY R PH#:
Facility Email: LCWALKER428@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0320 / 12/31/2014
Spartanburg / Corporation
4026 MOORE DUNCAN HWY
MOORE, SC 29369-9721
MIDWAY RESIDENTIAL CARE FACILITY INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 14
Resident Beds: 14 **Resident Rooms: 7**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MIDWAY RESIDENTIAL CARE FACILITY #2

4026 MOORE DUNCAN HWY
MOORE, SC 29369-9721 FACILITY #:864-433-8777
GIBSON, STACEY R PH#:
Facility Email: LCWALKER428@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0321 / 12/31/2014
Spartanburg / Corporation
4026 MOORE DUNCAN HWY
MOORE, SC 29369-9721
MIDWAY RESIDENTIAL CARE FACILITY INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 25
Resident Beds: 25 **Resident Rooms: 11**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MIDWAY RESIDENTIAL CARE FACILITY #3

4026 MOORE DUNCAN HWY
MOORE, SC 29369-9721 FACILITY #:864-433-8777
GIBSON, STACEY R PH#:
Facility Email: LCWALKER428@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0346 / 12/31/2014
Spartanburg / Corporation
4026 MOORE DUNCAN HWY
MOORE, SC 29369-9721
MIDWAY RESIDENTIAL CARE FACILITY INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 17
Resident Beds: 17 **Resident Rooms: 7**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MIDWAY RESIDENTIAL CARE FACILITY #4

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721 FACILITY #:864-433-8777

GIBSON, STACEY R PH#:

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0322 / 12/31/2014

Spartanburg / Corporation

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721

MIDWAY RESIDENTIAL CARE FACILITY INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 14****Resident Beds: 14 Resident Rooms: 7****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MIDWAY RESIDENTIAL CARE FACILITY #5**

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721 FACILITY #:864-433-8777

GIBSON, STACEY R PH#:

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0616 / 12/31/2014

Spartanburg / Corporation

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721

MIDWAY RESIDENTIAL CARE FACILITY INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 12****Resident Beds: 12 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MILES RESIDENTIAL CARE**

490 KOON STORE RD

COLUMBIA, SC 29203-9573 FACILITY #:803-754-4039

MILES, BETTY A PH#: 803-754-4039

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0695 / 12/31/2013 (Renewal Pending)

Richland / Partnership

4230 HIGHLAND PARK DR

COLUMBIA, SC 29204-1729

BETTY A AND LOUIS B MILES

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 7****Resident Beds: 7 Resident Rooms: 4****Staff Beds: 2 Staff Rooms: 2****Other Beds: 0 Other Rooms: 0****MILL STREET COMMUNITY RESIDENCE**

415 MILL ST

LAURENS, SC 29360-1905 FACILITY #:864-984-3506

MERCER, PHYLLIS D PH#: 864-984-3506

Facility Email: DMERCER@LCDSND.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1419 / 12/31/2014

Laurens / Non-Profit Corporation

PO BOX 986

LAURENS, SC 29360-0986

LAURENS COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 8****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MILLER'S PLACE

140 COX ST
SPARTANBURG, SC 29306-4807 FACILITY #:864-573-7008
MILLER, ANNIE M PH#: 864-573-7008
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0897 / 11/30/2014
Spartanburg / Limited Liability
140 COX ST
SPARTANBURG, SC 29306-4807
MILLER PLACE LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 19
Resident Beds: 19 **Resident Rooms: 9**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MIRCI GROUP HOME I

581 BECKMAN DR
COLUMBIA, SC 29203-3207 FACILITY #:803-754-4221
PH#:
Facility Email: BEVANS@MIRCI.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1443 / 06/30/2014
Richland / Corporation
PO BOX 4246
COLUMBIA, SC 29240-4246
MENTAL ILLNESS RECOVERY CENTER INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 6
Resident Beds: 6 **Resident Rooms: 6**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MIRCI GROUP HOME II

611 BECKMAN RD
COLUMBIA, SC 29203-3282 FACILITY #:803-754-8894
PH#:
Facility Email: BEVANS@MIRCI.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1444 / 06/30/2014
Richland / Corporation
PO BOX 4246
COLUMBIA, SC 29240-4246
MENTAL ILLNESS RECOVERY CENTER INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 6
Resident Beds: 6 **Resident Rooms: 6**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MONTROSE MANOR

80 MEDICAL CENTER DR
WOODRUFF, SC 29388-8781 FACILITY #:864-476-9100
KOESTER, KELLY H PH#: 864-444-0082
Facility Email: MONTROSEMANORALF@GMAIL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1417 / 12/31/2014
Spartanburg / Limited Liability
80 MEDICAL CENTER DR
WOODRUFF, SC 29388-8781
LAKEFIELD PROPERTIES LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 60
Resident Beds: 60 **Resident Rooms: 35**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MORNINGSIDE OF ANDERSON

1304 MCLEES RD
ANDERSON, SC 29621-3345 FACILITY #:864-964-9088
SPEER, RICHARD W PH#: 864-964-9088
Facility Email: RSPEER@5SQC.COM
Fac. Cont. Email: RSPEER@5SQC.COM

CRC-1093 / 04/30/2015
Anderson / Limited Liability Limited Partnership
1304 MCLEES RD
ANDERSON, SC 29621-3345
MORNINGSIDE OF ANDERSON LP

Alzheimer Care: Yes **Max # Residents: 15**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 88
Resident Beds: 88 **Resident Rooms: 44**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MORNINGSIDE OF BEAUFORT

109 OLD SALEM RD
BEAUFORT, SC 29902-5113 FACILITY #:843-982-0220
SIEGNER, TAMATHE J PH#: 843-982-0220
Facility Email: TSIEGNER@5SQC.COM
Fac. Cont. Email: TSIEGNER@5SQC.COM

CRC-1267 / 06/30/2014
Beaufort / Ltd. Liability
109 OLD SALEM RD
BEAUFORT, SC 29902-5113
MORNINGSIDE OF BEAUFORT LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 49
Resident Beds: 49 **Resident Rooms: 37**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MORNINGSIDE OF CAMDEN

715 KERSHAW HWY
CAMDEN, SC 29020-1634 FACILITY #:803-713-8668
HOYT-ZOELLER, DEANNA J PH#: 803-713-8668
Facility Email: LICENSING@5SQC.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1259 / 01/31/2015
Kershaw / Ltd. Liability
715 KERSHAW HWY
CAMDEN, SC 29020-1634
MORNINGSIDE OF CAMDEN LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 49
Resident Beds: 49 **Resident Rooms: 40**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

MORNINGSIDE OF GEORGETOWN

2628 N FRASER ST
GEORGETOWN, SC 29440-6946 FACILITY #:843-520-0319
WEAVER, ANITA N PH#: 843-520-0319
Facility Email: AWEAVER@5SQC.COM
Fac. Cont. Email: AWEAVER@5SQC.COM

CRC-1102 / 05/31/2014 (Renewal Pending)
Georgetown / Limited Liability Limited Partnership
2628 N FRASER ST
GEORGETOWN, SC 29440-6946
MORNINGSIDE OF SOUTH CAROLINA LP

Alzheimer Care: Yes **Max # Residents: 30**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 59
Resident Beds: 59 **Resident Rooms: 50**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MORNINGSIDE OF GREENWOOD

116 ENTERPRISE CT
GREENWOOD, SC 29649-1666 FACILITY #:864-388-9433
PH#:

Facility Email: KAMERSON@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1088 / 04/30/2015

Greenwood / Limited Liability Limited Partnership

116 ENTERPRISE CT
GREENWOOD, SC 29649-1666

MORNINGSIDE OF GREENWOOD LP

Alzheimer Care: No **Max # Residents: 0**

Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 49

Resident Beds: 49 **Resident Rooms: 44**

Staff Beds: 0 **Staff Rooms: 0**

Other Beds: 0 **Other Rooms: 0**

MORNINGSIDE OF HARTSVILLE

1901 W CAROLINA AVE
HARTSVILLE, SC 29550-4701 FACILITY #:843-857-0159
JONES, DAVID G PH#: 843-857-0159

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1099 / 06/30/2014

Darlington / Ltd. Liability

1901 W CAROLINA AVE
HARTSVILLE, SC 29550-4701

MORNINGSIDE OF HARTSVILLE LLC

Alzheimer Care: Yes **Max # Residents: 10**

Alzheimer Unit: Yes **Max # Beds: 10**

Total Number of Licensed Beds: 54

Resident Beds: 54 **Resident Rooms: 50**

Staff Beds: 0 **Staff Rooms: 0**

Other Beds: 0 **Other Rooms: 0**

MORNINGSIDE OF LANCASTER

1004 HARDIN ST
LANCASTER, SC 29720-1609 FACILITY #:803-285-8152
HODGIN, PAIGE L PH#: 803-980-4100

Facility Email: NBROOKS@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1146 / 03/31/2015

Lancaster / Limited Liability Limited Partnership

1004 HARDIN ST
LANCASTER, SC 29720-1609

MORNINGSIDE OF SOUTH CAROLINA LP

Alzheimer Care: Yes **Max # Residents: 14**

Alzheimer Unit: Yes **Max # Beds: 14**

Total Number of Licensed Beds: 65

Resident Beds: 65 **Resident Rooms: 52**

Staff Beds: 0 **Staff Rooms: 0**

Other Beds: 0 **Other Rooms: 0**

MORNINGSIDE OF LEXINGTON

218 OLD CHAPIN RD
LEXINGTON, SC 29072-2030 FACILITY #:803-957-3600
HENSLEY, MELISA I PH#: 803-957-3600

Facility Email: FELLROTT@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1280 / 06/30/2014

Lexington / Ltd. Liability

218 OLD CHAPIN RD
LEXINGTON, SC 29072-2030

MORNINGSIDE OF LEXINGTON LLC

Alzheimer Care: No **Max # Residents: 0**

Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 49

Resident Beds: 49 **Resident Rooms: 44**

Staff Beds: 0 **Staff Rooms: 0**

Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MORNINGSIDE OF ORANGEBURG

2306 RIVERBANK DR
ORANGEBURG, SC 29118-4046 FACILITY #:803-539-2911
JOHNSON, JERRI S PH#: 803-539-2911
Facility Email: LICENSING@5SQC.COM
Fac. Cont. Email: JSJOHNSON@5SQC.COM

CRC-1261 / 02/28/2015
Orangeburg / Ltd. Liability
2306 RIVERBANK DR
ORANGEBURG, SC 29118-4046
MORNINGSIDE OF ORANGEBURG LLC

Alzheimer Care: Yes Max # Residents: 49
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 49
Resident Beds: 49 Resident Rooms: 45
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF ROCK HILL

1830 W MAIN ST
ROCK HILL, SC 29732-8965 FACILITY #:803-980-4100
PLUMMER, JEFFREY S PH#: 803-980-4100
Facility Email: PHODGIN@5SQC.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1114 / 08/31/2014
York / Limited Liability Limited Partnership
1830 W MAIN ST
ROCK HILL, SC 29732-8965
MORNINGSIDE OF SOUTH CAROLINA LP

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 60
Resident Beds: 60 Resident Rooms: 49
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF SENECA

15855 WELLS HWY
SENECA, SC 29678-1078 FACILITY #:864-888-8886
KELLEY, GWENDELL M PH#: 864-888-8886
Facility Email: GKELLEY@5SQC.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1157 / 05/31/2015
Oconee / Limited Liability Limited Partnership
15855 WELLS HWY
SENECA, SC 29678-1078
MORNINGSIDE OF SENECA LP

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 59
Resident Beds: 59 Resident Rooms: 49
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF SUMTER

2500 LIN DO CT
SUMTER, SC 29150-1832 FACILITY #:803-469-4490
PH#: 803-469-4490
Facility Email: GBROWN@5SQC.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1079 / 04/30/2015
Sumter / Limited Liability Limited Partnership
2500 LIN DO CT
SUMTER, SC 29150-1832
MORNINGSIDE OF SOUTH CAROLINA LP

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 55
Resident Beds: 55 Resident Rooms: 49
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MY FATHER'S HOUSE

22 LARNES ST
CHARLESTON, SC 29403-2636 FACILITY #:843-723-7889
STENT, JOSEPHINE I PH#: 843-723-7889
Facility Email: JSTENT@BELLSOUTH.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0459 / 02/28/2015
Charleston / Partnership
PO BOX 1647
CHARLESTON, SC 29402-1647
JOSEPHINE STENT AND ELOISE CHESTNUT

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 4**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

MY HOUSE COMMUNITY HOME

273 MARTIN RD
CADES, SC 29518-3381 FACILITY #:843-382-4223
GLASSCHO, GERMAN PH#: 843-382-3277
Facility Email: NIMC@FTC-I-NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1318 / 07/31/2014
Williamsburg / Sole Proprietorship
PO BOX 358
GREELEYVILLE, SC 29056-0358
GERMAN GLASSCHO

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 4
Resident Beds: 4 **Resident Rooms: 2**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

MYERS RESIDENTIAL CARE FACILITY

365 CALDON RD
SWANSEA, SC 29160-9541 FACILITY #:803-568-3582
MYERS, LOUISE PH#: 803-568-3582
Facility Email: MYERSRCF@PBTCOMM.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0644 / 08/31/2014
Calhoun / Partnership
365 CALDON RD
SWANSEA, SC 29160-9541
LOUISE AND DAVID MYERS JR

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

MYERS RESIDENTIAL CARE FACILITY II

365 CALDON RD
SWANSEA, SC 29160-9541 FACILITY #:803-568-3582
MYERS, LOUISE PH#: 803-568-3582
Facility Email: MYERSRCF@PBTCOMM.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0851 / 01/31/2015
Calhoun / Partnership
365 CALDON RD
SWANSEA, SC 29160-9541
LOUISE AND DAVID MYERS JR

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 7
Resident Beds: 7 **Resident Rooms: 6**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MYRTLE BEACH ESTATES

3620 HAPPY WOODS CT

MYRTLE BEACH, SC 29588-2925 FACILITY #:843-293-8888

GORE, KAREN R PH#: 843-293-8888

Facility Email: KGOE@CAPITALSENIORLIVING.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1403 / 11/30/2014

Horry / Corporation

3620 HAPPY WOODS CT

MYRTLE BEACH, SC 29588-2925

CSL LEASECO INC

Alzheimer Care: Yes Max # Residents: 42**Alzheimer Unit: Yes Max # Beds: 42****Total Number of Licensed Beds: 142****Resident Beds: 142 Resident Rooms: 80****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****MYRTLE BEACH MANOR RETIREMENT COMMUNITY**

9547 HWY 17 N

MYRTLE BEACH, SC 29572-0000 FACILITY #:843-449-5283

BEARD, MICHAEL W PH#: 843-449-5283

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: MBEARD@5SQC.COM

CRC-1253 / 01/31/2015

Horry / Corporation

400 CENTRE ST, FIVE STAR QUALITY CARE-LICENSING

NEWTON, MA 02458-2094

FS TENANT POOL I TRUST

Alzheimer Care: Yes Max # Residents: 0**Alzheimer Unit: Yes Max # Beds: 30****Total Number of Licensed Beds: 111****Resident Beds: 111 Resident Rooms: 111****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****NEW BEGINNINGS OF PINEVILLE**

212 MITCHELLBAY LN

PINEVILLE, SC 29468-3200 FACILITY #:843-351-2240

RAVENELL, HELEN W PH#: 843-753-7534

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1521 / 04/30/2015

Berkeley / Sole Proprietorship

212 MITCHELL BAY LN

PINEVILLE, SC 29468

RAVENELL, HELEN W

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 4****Resident Beds: 4 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****NICHOLS RESIDENTIAL CARE FACILITY**

702 E RAILROAD AVE

LINCOLNVILLE, SC 29485-7228 FACILITY #:843-821-9608

NICHOLS, LAVERNE PH#: 843-821-9608

Facility Email: NICHOLSRESIDENT@KNOLOGY.COM

Fac. Cont. Email: NICHOLSRESIDENTIAL@AOL.COM

CRC-0973 / 12/31/2014

Charleston / Partnership

702 E RAILROAD AVE

SUMMERVILLE, SC 29485-7228

ALONZO NICHOLS AND LAVERNE NICHOLS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

NORTH HAVEN RESIDENTIAL CARE HOME

4326 LESLIE ST

NORTH CHARLESTON, SC 29418-5441 FACILITY #:843-767-2541

LANGIT, LEONORA D PH#: 843-767-2541

Facility Email: NORAALFLLC@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0877 / 08/31/2014

Charleston / Corporation

4326 LESLIE ST

NORTH CHARLESTON, SC 29418-5441

NORTH HAVEN RESIDENTIAL CARE HOME INC

Alzheimer Care: Yes Max # Residents: 2**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 16****Resident Beds: 16 Resident Rooms: 8****Staff Beds: 2 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****NORTH PINES COMMUNITY RESIDENCE**

313 N PINES RD

BLYTHEWOOD, SC 29016-8788 FACILITY #:803-754-6213

LOCKHART, ELESJA J PH#: 803-783-2381

Facility Email: S.TURNER@CHESCOSERVICES.ORG

Fac. Cont. Email: EYL75@SCDNH.ORG

CRC-1504 / 04/30/2015

Richland / County

PO BOX 151

CHESTERFIELD, SC 29709-0151

CHESCO SERVICES

Alzheimer Care: Yes Max # Residents: 1**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 8****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****NORTH POINTE ASSISTED LIVING**

701 SIMPSON RD

ANDERSON, SC 29621-3077 FACILITY #:864-226-5505

GARRISON, ANDREW HODGE PH#: 864-226-5505

Facility Email: ANDYGARRISON@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1454 / 10/31/2013 (Renewal Pending)

Anderson / Limited Liability

CSL NORTH POINTE SC LLC

Alzheimer Care: Yes Max # Residents: 28**Alzheimer Unit: Yes Max # Beds: 28****Total Number of Licensed Beds: 70****Resident Beds: 70 Resident Rooms: 41****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****NORTHWOODS SENIOR LIVING & MEMORY CARE**

1267 N MAIN ST

SUMTER, SC 29153-2138 FACILITY #:803-774-5700

MCKINLEY, MITCHELL PH#: 803-774-5700

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1442 / 05/31/2015

Sumter / Non-Profit Corporation

PO BOX 296

SUMTER, SC 29151-0296

EMPOWERED PERSONAL CARE HOME HEALTH ALLIANCE INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 79****Resident Beds: 79 Resident Rooms: 47****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

OAKBRIDGE TERRACE AT PARK POINTE VILLAGE

3025 CHESBROUGH BLVD

ROCK HILL, SC 29732-8078 FACILITY #:803-327-4723

PETTY, JAMES H PH#:

Facility Email: NLATTIMER@ACTSLIFE.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1374 / 07/31/2014

York / Non-Profit Corporation

3025 CHESBROUGH BLVD

ROCK HILL, SC 29732-8078

PARK POINTE VILLAGE INC

Alzheimer Care: Yes **Max # Residents: 7**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 20
Resident Beds: 20 **Resident Rooms: 20**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

OAKLEAF VILLAGE AT THORNBLADE

1560 THORNBLADE BLVD

GREER, SC 29650-4520 FACILITY #:864-968-1277

WOOLLEY, KATHRYN D PH#: 864-968-1277

Facility Email: KWOOLLEY@ROYALGREENVILLE.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1330 / 04/30/2015

Greenville / Ltd. Liability

1560 THORNBLADE BLVD

GREER, SC 29650-4520

RSC GREENVILLE LLC

Alzheimer Care: Yes **Max # Residents: 19**
Alzheimer Unit: Yes **Max # Beds: 24**

Total Number of Licensed Beds: 100
Resident Beds: 100 **Resident Rooms: 90**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

OAKLEAF VILLAGE OF LEXINGTON

800 N LAKE DR

LEXINGTON, SC 29072-2903 FACILITY #:803-808-3477

ANDERSON, MELANIE W PH#: 803-808-3477

Facility Email: MANDERSON@ROYAL-LEXINGTON.COM

Fac. Cont. Email: MANDERSON@OAKLAFVILLAGE.COM

CRC-1329 / 04/30/2015

Lexington / Ltd. Liability

800 N LAKE DR

LEXINGTON, SC 29072-2903

RSC LEXINGTON LLC

Alzheimer Care: Yes **Max # Residents: 100**
Alzheimer Unit: Yes **Max # Beds: 27**

Total Number of Licensed Beds: 100
Resident Beds: 100 **Resident Rooms: 90**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

OAKRIDGE COMMUNITY CARE HOME #1

2470 OLD MILL RD

INMAN, SC 29349-9276 FACILITY #:864-472-6979

LAUGHTER, REBECCA H PH#: 864-472-6979

Facility Email: REBECCALAUGHTER@WINDSTREAM.NET

Fac. Cont. Email: BECK1041@EARTHLINK.NET

CRC-0241 / 08/31/2014

Spartanburg / Corporation

PO BOX 326

INMAN, SC 29349-0326

OAKRIDGE COMMUNITY CARE HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 38
Resident Beds: 38 **Resident Rooms: 13**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

OAKRIDGE COMMUNITY CARE HOME #2

35 S HOWARD ST
INMAN, SC 29349-1339 FACILITY #:864-472-3062
MAST, DARRYL A PH#: 864-472-8258
Facility Email: BECK1041@EARTHLINK.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0429 / 04/30/2015
Spartanburg / Corporation
PO BOX 326
INMAN, SC 29349-0326
OAKRIDGE COMMUNITY CARE HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 4**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

OAKVIEW BOARDING HOME

1818 S LIVE OAK DR
MONCKS CORNER, SC 29461-7216 FACILITY #:843-761-3273
BIASCAN, ERLINDA M PH#: 843-761-3273
Facility Email: BIASCANA@YAHOO.COM
Fac. Cont. Email: BIASCANA@YAHOO.COM

CRC-1153 / 04/30/2015
Berkeley / Corporation
1818 S LIVE OAK DR
MONCKS CORNER, SC 29461-7216
OAKVIEW BOARDING HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 5**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

OASIS RESIDENTIAL HOME

2317 PRINCE ST
GEORGETOWN, SC 29440-2925 FACILITY #:843-527-4848
HOUSER, KEISHA N PH#: 843-527-4848
Facility Email: OASISINC2001@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1219 / 08/31/2014
Georgetown / Corporation
2317 PRINCE ST
GEORGETOWN, SC 29440-2925
OASIS RESIDENTIAL HOME INC

Alzheimer Care: Yes **Max # Residents: 6**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 22
Resident Beds: 22 **Resident Rooms: 11**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

OLIVER'S CARE HOME

1200 LAWHORN RD
BLYTHEWOOD, SC 29016-8975 FACILITY #:803-754-3585
SIMMONS, NHAJIYAH RAHESSIA PH#: 803-754-3585
Facility Email: CLINZY.OLIVER@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1480 / 08/31/2014
Richland / Limited Liability
1200 LAWHORN RD
BLYTHEWOOD, SC 29016-8975
OLIVER CARE HOME LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

PADD-WREN HOME

2350 REGIONAL RD

FLORENCE, SC 29501-7028 FACILITY #:843-673-1005

MATTHEWS, KIMBERLY PH#: 843-673-1005

Facility Email: KIMBERLYMATTHEWS3971@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1451 / 07/31/2014

Florence / Non-Profit Corporation

2350 REGIONAL RD

FLORENCE, SC 29501-7028

PRESBYTERIAN AGENCY FOR THE DEVELOPMENTALLY DISABLED
INC**Alzheimer Care: No** **Max # Residents: 0****Alzheimer Unit: No** **Max # Beds: 0****Total Number of Licensed Beds: 6****Resident Beds: 6** **Resident Rooms: 6****Staff Beds: 0** **Staff Rooms: 0****Other Beds: 0** **Other Rooms: 0****PAGELAND CARE FACILITY**

206 S GUM ST

PAGELAND, SC 29728-2304 FACILITY #:843-672-5930

PH#:

Facility Email: PAGECARE@SHTC.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0999 / 04/30/2015

Chesterfield / Corporation

PO BOX 697

LANCASTER, SC 29721-0697

FUNDERBURK ASSOCIATES INC

Alzheimer Care: Yes **Max # Residents: 8****Alzheimer Unit: Yes** **Max # Beds: 25****Total Number of Licensed Beds: 58****Resident Beds: 58** **Resident Rooms: 30****Staff Beds: 0** **Staff Rooms: 0****Other Beds: 0** **Other Rooms: 0****PALMETTO RESIDENTIAL CARE OF NORTH CHARLESTON**

2834 SPRUILL AVE

NORTH CHARLESTON, SC 29405-8051 FACILITY #:843-744-8849

LESESNE, CLARA P PH#: 843-744-1249

Facility Email: EVERGREEN_1818@HOTMAIL.COM

Fac. Cont. Email: EVERGREEN1818@MSN.COM

CRC-1322 / 08/31/2014

Charleston / Corporation

PO BOX 31774

CHARLESTON, SC 29417-1774

EVERGREEN RESIDENTIAL CARE INC

Alzheimer Care: No **Max # Residents: 0****Alzheimer Unit: No** **Max # Beds: 0****Total Number of Licensed Beds: 12****Resident Beds: 12** **Resident Rooms: 6****Staff Beds: 0** **Staff Rooms: 0****Other Beds: 0** **Other Rooms: 0****PALMETTO RIDGE ASSISTED LIVING & MEMORY CARE**

840 MANOR RD

CHERAW, SC 29520-4035 FACILITY #:843-537-4197

SMITH, REGINA PH#: 843-537-4197

Facility Email: CHERAWMANORASSIS@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1393 / 03/31/2015

Chesterfield / Limited Liability

PO BOX 278

CHERAW, SC 29520-0278

PALMETTO RIDGE ASSISTED LIVING AND MEMORY CARE LLC

Alzheimer Care: Yes **Max # Residents: 15****Alzheimer Unit: Yes** **Max # Beds: 26****Total Number of Licensed Beds: 106****Resident Beds: 106** **Resident Rooms: 51****Staff Beds: 0** **Staff Rooms: 0****Other Beds: 0** **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

PALMETTO VILLAGE OF CHESTER

570 CENTER ST

CHESTER, SC 29706-1342 FACILITY #:803-581-7319

WATTS, GLORIA (SUSIE) F PH#: 803-581-7319

Facility Email: SUSIE@BAYHOLDINGS.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1399 / 06/30/2014

Chester / Ltd. Liability

842 W 4TH ST

WINSTON SALEM, NC 27101-2502

BHM OF CHESTER LLC

Alzheimer Care: Yes Max # Residents: 6**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 100****Resident Beds: 100 Resident Rooms: 50****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PALMETTOS OF CHARLESTON**

1900 ASHLEY CROSSING DR

CHARLESTON, SC 29414-5751 FACILITY #:843-852-0505

MARTIN, MEGAN W PH#: 843-852-0505

Facility Email: MMARTIN@PALMETTOSOFCHARLESTON.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1263 / 07/31/2014

Charleston / Limited Liability

1900 ASHLEY CROSSING DR

CHARLESTON, SC 29414-5751

NHC PLACE-CHARLESTON LLC

Alzheimer Care: Yes Max # Residents: 15**Alzheimer Unit: Yes Max # Beds: 15****Total Number of Licensed Beds: 60****Resident Beds: 60 Resident Rooms: 60****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PALMETTOS OF MAULDIN**

810 E BUTLER RD

GREENVILLE, SC 29607-5842 FACILITY #:864-627-0803

DAVIS, KATHRYN H PH#: 864-675-6421

Facility Email: KDAVIS@THEPALMETTOSMAULDIN.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1503 / 03/31/2015

Greenville / Ltd. Liability

PO BOX 749

MAULDIN, SC 29662-0749

NHC HEALTHCARE/MAULDIN LLC

Alzheimer Care: Yes Max # Residents: 13**Alzheimer Unit: Yes Max # Beds: 18****Total Number of Licensed Beds: 60****Resident Beds: 60 Resident Rooms: 45****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PALMETTOS OF PARKLANE**

7811 PARKLANE RD

COLUMBIA, SC 29223-5620 FACILITY #:803-741-7233

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1513 / 04/30/2015

Richland / Limited Liability

7811 PARKLANE RD

COLUMBIA, SC 29223-5620

PALMETTOS OF PARKLANE LLC

Alzheimer Care: Yes Max # Residents: 10**Alzheimer Unit: Yes Max # Beds: 24****Total Number of Licensed Beds: 85****Resident Beds: 85 Resident Rooms: 75****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

PARK PLACE

2720 COUNTRY CLUB RD
SPARTANBURG, SC 29302-4473 FACILITY #:864-591-1116
PICARD, JACKI H PH#: 803-366-1189
Facility Email: PPAL.ADM@MERIDIANSSENIOR.COM
Fac. Cont. Email: AK_YORKVILG@COMPORIUM.NET

CRC-1351 / 07/31/2014
Spartanburg / Limited Liability
2720 COUNTRY CLUB RD
SPARTANBURG, SC 29302-4473
DSL AL HOLDINGS LLC

Alzheimer Care: Yes **Max # Residents: 32**
Alzheimer Unit: Yes **Max # Beds: 0**

Total Number of Licensed Beds: 100
Resident Beds: 100 **Resident Rooms: 86**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

PARKER'S RESIDENTIAL CARE HOME

935 PINEVIEW DR
NEW ELLENTON, SC 29809-3302 FACILITY #:803-652-7290
PARKER, DRUCILLA O PH#: 803-652-7290
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0311 / 01/31/2015
Aiken / Sole Proprietorship
935 PINEVIEW DR
NEW ELLENTON, SC 29809-3302
DRUCILLA PARKER

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 4**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

PASSIONATE CARE COMMUNITY CENTER

2206 HERTFORD DR
COLUMBIA, SC 29210-6130 FACILITY #:803-834-4544
MARTIN, DONALD E PH#: 803-446-5234
Facility Email: MARTINDONALD492@YAHOO.COM
Fac. Cont. Email: L-MARTINK@YAHOO.COM

CRC-1500 / 12/31/2014
Richland / Sole Proprietorship
2206 HERTFORD DR
COLUMBIA, SC 29210-6130
MARTIN, DONALD E

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 4**
Staff Beds: 0 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

PEE DEE GARDENS

3117 W PALMETTO ST
FLORENCE, SC 29505-5937 FACILITY #:843-667-6699
SCOTT, SHERRI R PH#: 843-875-7163
Facility Email: PPRESTON@DEPAUL.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1391 / 05/31/2014 (Renewal Pending)
Florence /

DEPAUL ADULT CARE COMMUNITIES INC

Alzheimer Care: Yes **Max # Residents: 22**
Alzheimer Unit: Yes **Max # Beds: 22**

Total Number of Licensed Beds: 68
Resident Beds: 68 **Resident Rooms: 47**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

PELION ELDERCARE

850 MAPLE ST
PELION, SC 29123-0206 FACILITY #:803-894-3646
BROWN, MARY W PH#: 803-564-5161
Facility Email: THEELDERCARES@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0631 / 07/31/2012 (Renewal Pending)
Lexington / Corporation
PO BOX 39
PELION, SC 29123-0039
TOMACO INC

Alzheimer Care: Yes **Max # Residents: 6**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 39
Resident Beds: 39 **Resident Rooms: 21**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

PENDLETON MANOR

414 SUMMIT DR
GREENVILLE, SC 29609-4821 FACILITY #:864-271-7562
TROUTMAN, TYLER PH#:
Facility Email: DWALKER@SCHONBERGERANDASSOC.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1455 / 08/31/2014
Greenville / Ltd. Liability
414 SUMMIT DR
GREENVILLE, SC 29609-4821
GREENVILLE RETIREMENT PROPERTIES LLC

Alzheimer Care: Yes **Max # Residents: 24**
Alzheimer Unit: Yes **Max # Beds: 30**

Total Number of Licensed Beds: 65
Resident Beds: 65 **Resident Rooms: 49**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

PEOPLES RESIDENTIAL CARE

120 ADDY LN
LEXINGTON, SC 29072-3405 FACILITY #:803-951-8591
PEOPLES, TIFFANY R PH#: 803-951-8591
Facility Email: PEOPLES.RESIDENTIAL@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1494 / 02/28/2015
Lexington / Partnership
120 ADDY LN
LEXINGTON, SC 29072-3405
JOHN PEOPLES SR & YVONNE HARRISON

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 15
Resident Beds: 15 **Resident Rooms: 11**
Staff Beds: 2 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

PERRY ELDERCARE

182 ROBERTS ST E
SALLEY, SC 29137-8943 FACILITY #:803-564-5092
BROWN, MARY W PH#: 803-564-5092
Facility Email: ANNEMLINDER@GMAIL.COM
Fac. Cont. Email: THEELDERCARES@AOL.COM

CRC-1183 / 01/31/2015
Aiken / Corporation
PO BOX 1189
WAGENER, SC 29164-1189
TOMACO INC

Alzheimer Care: Yes **Max # Residents: 2**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 14
Resident Beds: 14 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

PETTIS ANGELS RESIDENTIAL CARE

2614 MADDEN DR

NORTH CHARLESTON, SC 29405-5529 FACILITY #:843-308-9413

PETTIS, ETHEL S PH#: 843-308-9413

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0850 / 01/31/2015

Charleston / Sole Proprietorship

3879 WALNUT ST

CHARLESTON, SC 29405-7050

ETHEL S PETTIS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PHAIRE'S CARE AT KATURA SPRINGS**

12488 OLD NUMBER SIX HWY

EUTAWVILLE, SC 29048-9167 FACILITY #:803-492-7122

PHAIRE, CARLTON PH#: 803-536-5002

Facility Email: PHAIREOISE@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1301 / 06/30/2014

Orangeburg / Sole Proprietorship

PHAIRE, CARLTON

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 48****Resident Beds: 48 Resident Rooms: 24****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PIEDMONT PATHWAYS COMMUNITY RESIDENTIAL CARE FACILITY**

5640 LOWER RICHLAND BLVD

HOPKINS, SC 29061-9525 FACILITY #:803-783-2273

POLLARD, DAISY W PH#: 803-783-2381

Facility Email: DWP57@SCDMH.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1421 / 01/31/2015

Richland / State

5640 LOWER RICHLAND BLVD

HOPKINS, SC 29061-9525

PIEDMONT CENTER FOR MENTAL HEALTH SERVICES

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 15****Resident Beds: 15 Resident Rooms: 8****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PINEDALE RESIDENTIAL CENTER**

798 HERMITAGE POND RD

CAMDEN, SC 29020-9534 FACILITY #:803-432-9900

HUDSON, PHILLIP E PH#: 803-432-9900

Facility Email: PHUDSON83@YAHOO.COM

Fac. Cont. Email: NONE

CRC-0460 / 02/28/2015

Kershaw / Corporation

798 HERMITAGE POND RD

CAMDEN, SC 29020-9534

SHARECARE CORPORATION

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 50****Resident Beds: 50 Resident Rooms: 42****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

PINEWOOD PLACE

101 CENTENNIAL BLVD

GOOSE CREEK, SC 29445-7079 FACILITY #:843-569-2520

WILLIAMS, CINDY PH#:

Facility Email: ALEGUN@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1406 / 11/30/2014

Berkeley /

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

PINEWOOD AID OPCO LLC

Alzheimer Care: Yes Max # Residents: 4**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 39****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PONDVIEW RESIDENTIAL CARE HOME #1**

5342 HARDSCRABBLE RD

BLYTHEWOOD, SC 29016-9171 FACILITY #:803-735-0420

THOMAS, KATHERINE PH#: 803-735-0420

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0378 / 04/30/2015

Richland / Sole Proprietorship

PO BOX 544

BLYTHEWOOD, SC 29016-0544

KATHERINE W THOMAS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 12****Resident Beds: 12 Resident Rooms: 6****Staff Beds: 2 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****PONDVIEW RESIDENTIAL CARE HOME #2**

5338 HARDSCRABBLE RD

BLYTHEWOOD, SC 29016-9171 FACILITY #:803-735-0420

THOMAS, KATHERINE PH#: 803-735-0420

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1190 / 11/30/2014

Richland / Sole Proprietorship

PO BOX 544

BLYTHEWOOD, SC 29016-0544

KATHERINE W THOMAS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 4****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****PORT ROYAL COMMUNITY RESIDENCE**

1508 OLD SHELL RD

PORT ROYAL, SC 29935-1705 FACILITY #:843-255-6300

MAYSE, WANDA D PH#: 843-525-7684

Facility Email: MWAGNER@BCGOV.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1173 / 08/31/2014

Beaufort /

PO BOX 129

PORT ROYAL, SC 29935-0129

BEAUFORT COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 15****Resident Beds: 15 Resident Rooms: 8****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

PRESBYTERIAN HOME OF SOUTH CAROLINA-CLINTON (CRCF)

801 MUSGROVE ST

CLINTON, SC 29325-1796 FACILITY #:864-833-5190

HAIR, BRANDON T PH#: 864-859-4684

Facility Email: ASNIDER@PRESHOMESC.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0014 / 04/30/2015

Laurens / Non-Profit Corporation

2817 ASHLAND RD

COLUMBIA, SC 29210-5009

PRESBYTERIAN HOME OF SOUTH CAROLINA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 81****Resident Beds: 81 Resident Rooms: 81****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PRESBYTERIAN HOME OF SOUTH CAROLINA-COLUMBIA HOME (CRCF)**

700 DAVEGA DR

LEXINGTON, SC 29073-9698 FACILITY #:803-796-8700

JACKSON, WILLIAM F PH#: 803-796-8700

Facility Email: FJACKSON@PRESHOMESC.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0387 / 06/30/2014

Lexington / Non-Profit Corporation

700 DAVEGA DR

LEXINGTON, SC 29073-9698

PRESBYTERIAN HOME OF SOUTH CAROLINA

Alzheimer Care: Yes Max # Residents: 20**Alzheimer Unit: Yes Max # Beds: 20****Total Number of Licensed Beds: 83****Resident Beds: 83 Resident Rooms: 81****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PRESBYTERIAN HOME OF SOUTH CAROLINA-FLORENCE (CRCF)**

2350 W LUCAS ST

FLORENCE, SC 29501-1201 FACILITY #:843-665-2222

HICKMAN III, WALTER E PH#: 843-665-2222

Facility Email: WHICKMAN@PRESHOMESC.ORG

Fac. Cont. Email: WHICKMAN@PRESHOMESC.ORG

CRC-0242 / 09/30/2014

Florence / Non-Profit Corporation

2350 W LUCAS ST

FLORENCE, SC 29501-1201

PRESBYTERIAN HOME OF SOUTH CAROLINA

Alzheimer Care: Yes Max # Residents: 2**Alzheimer Unit: Yes Max # Beds: 13****Total Number of Licensed Beds: 47****Resident Beds: 47 Resident Rooms: 43****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****PRESBYTERIAN HOME OF SOUTH CAROLINA-FOOTHILLS (CRCF)**

205 BUD NALLEY DR

EASLEY, SC 29642 FACILITY #:864-859-3367

MIZE, SIDNEY K PH#: 864-859-3367

Facility Email: SMIZE@PRESHOMESC.ORG

Fac. Cont. Email: JLEHEUP@PRESHOMESC.ORG

CRC-1030 / 07/31/2014

Pickens / Non-Profit Corporation

205 BUD NALLEY DR

EASLEY, SC 29642

PRESBYTERIAN HOME OF SOUTH CAROLINA

Alzheimer Care: Yes Max # Residents: 6**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 32****Resident Beds: 32 Resident Rooms: 32****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

QUALITY CARE RESIDENTIAL HOME

107 ETLING AVE

GOOSE CREEK, SC 29445-3001 FACILITY #:843-863-0209

ESPANO, FE B PH#: 843-863-0209

Facility Email: FAYESPANO@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0715 / 05/31/2015

Berkeley / Partnership

107 ETLING AVE

GOOSE CREEK, SC 29445-3001

CLARO L AND FE B ESPANO

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 29****Resident Beds: 29 Resident Rooms: 25****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****QUIET ACRES RETIREMENT HOME**

2968 OLD DOUGLAS MILL RD

HODGES, SC 29653-8930 FACILITY #:864-446-2264

JOHNSON, MINNIE G PH#: 864-459-9892

Facility Email: QUIETACRESRESTHOME@YAHOO.COM

Fac. Cont. Email: QUIETACRESRESTHOME@YAHOO.COM

CRC-0588 / 05/31/2014 (Renewal Pending)

Abbeville / Sole Proprietorship

2968 OLD DOUGLAS MILL RD

HODGES, SC 29653-8930

MINNIE G JOHNSON

Alzheimer Care: Yes Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 5****Staff Beds: 2 Staff Rooms: 2****Other Beds: 0 Other Rooms: 0****QUILLEN MANOR**

709 QUILLEN AVE

FOUNTAIN INN, SC 29644-9444 FACILITY #:864-862-3252

FINLEY, FRANCES CAROLYN PH#: 864-476-9100

Facility Email: CAROLYN.QUILLEN@HOTMAIL.COM

Fac. Cont. Email: DKPENNN@DOVEHLC.COM

CRC-1321 / 12/31/2014

Greenville / Limited Liability

PO BOX 388

GREER, SC 29652-0388

QUILLEN MANOR LLC

Alzheimer Care: Yes Max # Residents: 12**Alzheimer Unit: Yes Max # Beds: 12****Total Number of Licensed Beds: 78****Resident Beds: 78 Resident Rooms: 51****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****RAPHA RESIDENTIAL CARE**

3959 FISH HATCHERY RD

GASTON, SC 29053-9038 FACILITY #:803-755-6541

PROSSER, PAULA C PH#: 803-642-8444

Facility Email: RAPHA3959@WILDBLUE.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1283 / 04/30/2015

Lexington / Limited Liability Limited Partnership

3959 FISH HATCHERY RD

GASTON, SC 29053-9038

MASTERMIND LIMITED PARTNERSHIP LLP

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 92****Resident Beds: 92 Resident Rooms: 73****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

REESE'S COMMUNITY CARE HOME #1

1203 E MULLER AVE
COLUMBIA, SC 29203-5926 FACILITY #:803-786-1843
REESE JR, JAMES S PH#: 803-786-1843
Facility Email: JREESE1904@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0053 / 03/31/2012 (Renewal Pending)
Richland / Corporation
1203 E MULLER AVE
COLUMBIA, SC 29203-5926
REESE'S COMMUNITY CARE HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 3**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

REESE'S COMMUNITY CARE HOME #2

717 CINDY DR
COLUMBIA, SC 29203-5205 FACILITY #:803-754-9798
REESE JR, JAMES S PH#: 803-786-1843
Facility Email: JREESE1904@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0054 / 03/31/2014 (Renewal Pending)
Richland / Corporation
1203 E MULLER AVE
COLUMBIA, SC 29203-5926
REESE'S COMMUNITY CARE HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 2 **Staff Rooms: 2**
Other Beds: 0 **Other Rooms: 0**

REFLECTIONS AT CAROLINA FOREST

219 MIDDLEBURG DR
MYRTLE BEACH, SC 29579-3409 FACILITY #:843-903-0700
CLARDY JR, WALLACE D PH#: 843-997-0773
Facility Email: SONNY@REFLECTIONSASSISTEDLIVING.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1456 / 11/30/2014
Horry / Corporation
219 MIDDLEBURG DR
MYRTLE BEACH, SC 29579-3409
REFLECTIONS AT CAROLINA FOREST INC

Alzheimer Care: Yes **Max # Residents: 2**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 42
Resident Beds: 42 **Resident Rooms: 30**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

REID HOUSE

117 DODD ST
WELLFORD, SC 29385-9475 FACILITY #:864-949-5120
DANIELS, KEISHA G PH#: 864-949-5120
Facility Email: KDANIELS@THE-REIDHOUSE.COM
Fac. Cont. Email: THEREIDHOUSEINC@AOL.COM

CRC-1463 / 01/31/2015
Spartanburg / Corporation
410 ROLLING PINES LN
DUNCAN, SC 29334-8821
REID HOUSE INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 42
Resident Beds: 42 **Resident Rooms: 21**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

REID'S RESIDENTIAL CARE FACILITY

726 OLD SPARTANBURG HWY

WELLFORD, SC 29385-9668 FACILITY #:864-439-9238

DANIELS, JUDY C PH#: 864-439-9238

Facility Email: GARVINJUDY@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0771 / 05/31/2014 (Renewal Pending)

Spartanburg / Sole Proprietorship

726 OLD SPARTANBURG HWY

WELLFORD, SC 29385-9668

JUDY DANIELS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 23****Resident Beds: 23 Resident Rooms: 10****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****RENAISSANCE**

16 DR FRANK PRESSLY DR

DUE WEST, SC 29639 FACILITY #:864-379-2554

SHERARD, STEPHEN F PH#:

Facility Email: PPRIDMORE@COVENANTWAY.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1207 / 12/31/2014

Abbeville / Non-Profit Corporation

PO BOX 307

DUE WEST, SC 29639-0307

RENAISSANCE LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 20****Resident Beds: 20 Resident Rooms: 20****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****RESIDENCES AT PARK PLACE**

115 GILLESPIE RD

SENECA, SC 29678-1126 FACILITY #:864-882-0783

HICKS, KYLE E PH#: 843-963-4956

Facility Email: SHWILLIAMS@MSA-CORP.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1493 / 08/31/2014

Oconee / Corporation

115 GILLESPIE RD

SENECA, SC 29678-1126

AMERICAN SENIOR LIVING COMMUNITIES INC

Alzheimer Care: Yes Max # Residents: 18**Alzheimer Unit: Yes Max # Beds: 14****Total Number of Licensed Beds: 100****Resident Beds: 100 Resident Rooms: 73****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****RESTING PLACE #1**

207 E SHOCKLEY FERRY RD

ANDERSON, SC 29624-3731 FACILITY #:864-226-0990

TOUCHTON, MARY S PH#: 864-226-0990

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0499 / 11/30/2014

Anderson / Sole Proprietorship

PO BOX 13866

ANDERSON, SC 29624-0018

MARY SIMS TOUCHTON

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 5****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

RICE ESTATE - ASSISTED LIVING

100 FINLEY RD
COLUMBIA, SC 29203-9264 FACILITY #:803-691-5740
PRIDMORE, ROBERT P PH#: 864-379-2554
Facility Email: RLYTLE@RICEESTATE.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1075 / 03/31/2015
Richland / Non-Profit Corporation
100 FINLEY RD
COLUMBIA, SC 29203-9264
LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

Alzheimer Care: Yes **Max # Residents: 14**
Alzheimer Unit: Yes **Max # Beds: 14**

Total Number of Licensed Beds: 50
Resident Beds: 50 **Resident Rooms: 50**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

RIDGEVIEW COMMUNITY CARE HOMES UNIT A

217 CHANDLER RD
GREER, SC 29651-1290 FACILITY #:864-877-8559
DAUGHERTY, PATRICIA L PH#: 864-877-8599
Facility Email: RIDGEVIEW1@MSN.COM
Fac. Cont. Email: RIDGEVIEW1@MSN.COM

CRC-0559 / 01/31/2015
Greenville / Corporation
217 CHANDLER RD
GREER, SC 29651-1290
RIDGEVIEW COMMUNITY CARE HOMES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 11
Resident Beds: 11 **Resident Rooms: 6**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

RIDGEVIEW COMMUNITY CARE HOMES UNIT B

217 CHANDLER RD
GREER, SC 29651-1290 FACILITY #:864-877-8599
DAUGHERTY, PATRICIA L PH#: 864-877-8599
Facility Email: RIDGEVIEW1@MSN.COM
Fac. Cont. Email: RIDGEVIEW1@MSN.COM

CRC-0560 / 01/31/2015
Greenville / Corporation
217 CHANDLER RD
GREER, SC 29651-1290
RIDGEVIEW COMMUNITY CARE HOMES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 5**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

RIDGEVIEW COMMUNITY CARE HOMES UNIT C

217 CHANDLER RD
GREER, SC 29651-1290 FACILITY #:864-877-8599
DAUGHERTY, PATRICIA L PH#: 864-877-8599
Facility Email: RIDGEVIEW1@MSN.COM
Fac. Cont. Email: RIDGEVIEW1@MSN.COM

CRC-0561 / 01/31/2015
Greenville / Corporation
217 CHANDLER RD
GREER, SC 29651-1290
RIDGEVIEW COMMUNITY CARE HOMES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 11
Resident Beds: 11 **Resident Rooms: 6**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

RIDGEVIEW COMMUNITY CARE HOMES UNIT D

217 CHANDLER RD

GREER, SC 29651-1290 FACILITY #:864-877-8599

DAUGHERTY, PATRICIA L PH#: 864-877-8599

Facility Email: RIDGEVIEW1@MSN.COM

Fac. Cont. Email: RIDGEVIEW1@MSN.COM

CRC-0562 / 01/31/2015

Greenville / Corporation

217 CHANDLER RD

GREER, SC 29651-1290

RIDGEVIEW COMMUNITY CARE HOMES INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 11****Resident Beds: 11 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****RILEYS RESIDENTIAL CARE HOME**

2327 BRIAN CHRISTOPHER RD

GREAT FALLS, SC 29055-8844 FACILITY #:803-482-3290

GOODE-RILEY, BEVERLY PH#: 803-482-3290

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0900 / 10/31/2014

Chester / Sole Proprietorship

2327 BRIAN CHRISTOPHER RD

GREAT FALLS, SC 29055-8844

BEVERLY GOODE-RILEY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 4****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****RIVER OAKS**

1251 LADYS ISLAND DR

PORT ROYAL, SC 29935-1106 FACILITY #:843-521-2298

BEERE, VALERIE PH#:

Facility Email: MBEAVER@HOLLINGERGROUP.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0733 / 05/31/2015

Beaufort / Limited Liability

4550 LENA DR STE 225

MECHANICSBURG, PA 17055-4920

RIVER OAKS SENIOR CARE LLC

Alzheimer Care: Yes Max # Residents: 5**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 62****Resident Beds: 62 Resident Rooms: 48****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****ROBIN'S RESIDENTIAL CARE FACILITY**

1216 HYATT AVE

COLUMBIA, SC 29203-5932 FACILITY #:803-754-5097

JAMISON, LILLIAN R PH#: 803-754-5097

Facility Email: LILLIJAMIS@ATT.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0516 / 08/31/2014

Richland / Corporation

PO BOX 3082

COLUMBIA, SC 29230-3082

ROBIN'S RESIDENTIAL CARE INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 9****Resident Beds: 9 Resident Rooms: 3****Staff Beds: 3 Staff Rooms: 3****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

ROCKHAVEN COMMUNITY CARE HOME

524 ROCKHAVEN DR
COLUMBIA, SC 29223-7805 FACILITY #:803-699-5361
BARNES, RICHIE D PH#: 803-699-5361
Facility Email: RBARNES5@SC.RR.COM
Fac. Cont. Email: RBARNES5@SC.RR.COM

CRC-0800 / 01/31/2015
Richland / Sole Proprietorship
524 ROCKHAVEN DR
COLUMBIA, SC 29223-7805
RICHIE D BARNES

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 4**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

ROCKY RIVER BAPTIST ASSOCIATION RESIDENTIAL CARE HOME

250 UNION HIGH DR
BELTON, SC 29627-2445 FACILITY #:864-338-1410
TOUCHTON, JORDANA M PH#: 864-338-1410
Facility Email: ROCKYRIVERRCF@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1270 / 04/30/2015
Anderson / Non-Profit Corporation
250 UNION HIGH DR
BELTON, SC 29627-2445
ROCKY RIVER BAPTIST ASSOCIATION

Alzheimer Care: Yes **Max # Residents: 2**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 28
Resident Beds: 28 **Resident Rooms: 15**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

ROLLING GREEN VILLAGE ASSISTED LIVING FACILITY

1 HOKE SMITH BLVD OFC
GREENVILLE, SC 29615-5399 FACILITY #:864-987-9800
TOERNER, RYAN J PH#:
Facility Email: ERICD@ROLLINGGREENVILLAGE.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0573 / 03/31/2015
Greenville / Non-Profit Corporation
1 HOKE SMITH BLVD OFC
GREENVILLE, SC 29615-5399
ROLLING GREEN VILLAGE

Alzheimer Care: Yes **Max # Residents: 22**
Alzheimer Unit: Yes **Max # Beds: 22**

Total Number of Licensed Beds: 52
Resident Beds: 52 **Resident Rooms: 50**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

ROSECREST COMMUNITY RESIDENTIAL CARE

200 FORTRESS DR
INMAN, SC 29349-9160 FACILITY #:864-599-8600
CLEMENTS, JAMES A PH#: 000-000-0000
Facility Email: JCLEMENTS@ROSECREST.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1208 / 07/31/2014
Spartanburg / Non-Profit Corporation
200 FORTRESS DR
INMAN, SC 29349-9160
LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

Alzheimer Care: Yes **Max # Residents: 14**
Alzheimer Unit: Yes **Max # Beds: 14**

Total Number of Licensed Beds: 59
Resident Beds: 59 **Resident Rooms: 34**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

ROSEDALE COMMUNITY CARE HOME

107 MONTGOMERY ST
CAMPOBELLO, SC 29322-8941 FACILITY #:864-472-6191
GARLAND, MICHELLE A PH#: 864-472-6191
Facility Email: MADG1959@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0074 / 02/28/2015
Spartanburg / Sole Proprietorship
PO BOX 363
CAMPOBELLO, SC 29322-0363
JOHN D GARLAND

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 3**
Staff Beds: 2 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

ROSEWOOD ASSISTED LIVING

5221 HWY 215
PAULINE, SC 29374-1908 FACILITY #:864-573-4060
CLOBES, KIMBERLY H PH#: 864-573-4060
Facility Email: WIJG38@GMAIL.COM
Fac. Cont. Email: WIJG38@AOL.COM

CRC-1367 / 11/30/2014
Spartanburg / Ltd. Liability
PO BOX 35
PAULINE, SC 29374-0035
ROSEWOOD ASSISTED LIVING LLC

Alzheimer Care: Yes **Max # Residents: 10**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 67
Resident Beds: 67 **Resident Rooms: 33**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

ROUSE COMMUNITY CARE HOME #1

102 BALLENTON RD
COLUMBIA, SC 29203-9073 FACILITY #:803-788-1753
ROUSE, CHARLENE E PH#: 803-788-1753
Facility Email: MATRICEROUSE@AOL.COM
Fac. Cont. Email: MATRICEROUSE@AOL.COM

CRC-0327 / 12/31/2014
Richland / Corporation
PO BOX 134
STATE PARK, SC 29147-0134
ROUSE COMMUNITY CARE HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 4**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

ROUSE COMMUNITY CARE HOME #2

8809 WILSON BLVD
COLUMBIA, SC 29203-1817 FACILITY #:803-786-9357
ADDISON-DOCTOR, SARAH PH#: 803-736-0455
Facility Email: MATRICEROUSE@AOL.COM
Fac. Cont. Email: SARDCT@BELLSOUTH.NET

CRC-0328 / 12/31/2014
Richland / Corporation
PO BOX 134
STATE PARK, SC 29147-0134
ROUSE COMMUNITY CARE HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 3**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

ROUSE COMMUNITY CARE HOME #3

9316 WILSON BLVD
COLUMBIA, SC 29203-9769 FACILITY #:803-754-5720
ROUSE, CHARLENE E PH#: 803-754-5720
Facility Email: MATRICEROUSE@AOL.COM
Fac. Cont. Email: MATRICEROUSE@AOL.COM

CRC-0238 / 09/30/2014
Richland / Corporation
PO BOX 134
STATE PARK, SC 29147-0134
ROUSE COMMUNITY CARE HOME INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 3**
Staff Beds: 0 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

ROYAL OAKS

950 TRAVELERS BLVD
SUMMERVILLE, SC 29485-8213 FACILITY #:843-832-8481
BAZEN, TIFFANY R PH#: 843-832-8481
Facility Email: MBEAVER@HOLLINGERGROU.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0859 / 05/31/2015
Dorchester / Limited Liability
4550 LENA DR STE 225
MECHANICSBURG, PA 17055-4920
ROYAL OAKS SENIOR CARE LLC

Alzheimer Care: Yes **Max # Residents: 8**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 53
Resident Beds: 53 **Resident Rooms: 47**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

RUDNICK CRCF

629 CHESTERFIELD ST
AIKEN, SC 29801-4053 FACILITY #:803-642-1041
DUNBAR, REPUNZEL PH#: 000-000-0000
Facility Email: RDUNBAR@AIKENTDC.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1429 / 02/28/2015
Aiken / County
PO BOX 698
AIKEN, SC 29802-0698
TRI-DEVELOPMENT CENTER OF AIKEN COUNTY INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 4**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

RUMPH'S RESIDENTIAL CARE

574 PROGRESSIVE WAY
DENMARK, SC 29042-1873 FACILITY #:803-793-0068
COLLINS, SEBRINA C PH#: 803-793-0068
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0791 / 11/30/2014
Bamberg / Corporation
PO BOX 383
DENMARK, SC 29042-0383
RUMPH'S RESIDENTIAL CARE INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 3**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

S & S ASSISTANCE HOUSING

800 HENDRIX ST
LEXINGTON, SC 29072-2540 FACILITY #:803-359-4259
HUNTER, KIMBERLY M PH#: 803-359-4259
Facility Email: HARRISSHERRILL@GMAIL.COM
Fac. Cont. Email: JJAY@MHA-SC.ORG

CRC-1526 / 09/30/2014
Lexington / Sole Proprietorship
PO BOX 1361
LEXINGTON, SC 29071-1361
S & S ASSISTANCE HOUSING LLC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 5
Resident Beds: 5 Resident Rooms: 3
Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

S M STRONG'S COMMUNITY RESIDENTIAL CARE

65 DOVE ST
KINGSTREE, SC 29556-3146 FACILITY #:843-355-3487
STRONG, SUSIE M PH#: 843-354-3487
Facility Email: S.S.STRONG@FTC-I.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1195 / 02/28/2014 (Renewal Pending)
Williamsburg / Sole Proprietorship
150 VARNER AVE
GREELEYVILLE, SC 29056-8949
SUSIE M STRONG

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 5
Resident Beds: 5 Resident Rooms: 3
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SANDERS CRCF

625 CHESTERFIELD ST
AIKEN, SC 29801-4053 FACILITY #:803-642-1044
DUNBAR, REPUNZEL PH#: 000-000-0000
Facility Email: RDUNBAR@AIKENDC.ORG
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1430 / 02/28/2015
Aiken / County
PO BOX 698
AIKEN, SC 29802-0698
TRI-DEVELOPMENT CENTER OF AIKEN COUNTY INC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 8
Resident Beds: 8 Resident Rooms: 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SANDPIPER COURTYARD ASSISTED LIVING

1047 ANNA KNAPP BLVD
MOUNT PLEASANT, SC 29464-3133 FACILITY #:843-884-7977
JANSE, SHEENA M PH#: 843-884-7977
Facility Email: SJANSE@SANDPIPERCENTER.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1325 / 09/30/2014
Charleston / Limited Liability
1047 ANNA KNAPP BLVD
MOUNT PLEASANT, SC 29464-3133
SANDPIPER INDEPENDENT AND ASSISTED LIVING-DELAWARE LLC

Alzheimer Care: Yes Max # Residents: 5
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 64
Resident Beds: 64 Resident Rooms: 57
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SAVANNAH HALL ASSISTED LIVING

1010 LAKE HUNTER CIR

MOUNT PLEASANT, SC 29464-5417 FACILITY #:843-388-2030

RIVERS, LESLIE A PH#: 843-388-2030

Facility Email: KDFOOR@BELLPARTNERSINC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1431 / 06/30/2014

Charleston /

SNH SE SG TENANT LLC

Alzheimer Care: Yes Max # Residents: 16**Alzheimer Unit: Yes Max # Beds: 16****Total Number of Licensed Beds: 32****Resident Beds: 32 Resident Rooms: 28****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SAVANNAH PLACE**

1501 SECESSIONVILLE RD

CHARLESTON, SC 29412-8236 FACILITY #:843-762-1396

ORAGE, DARYL PH#: 843-762-1396

Facility Email: DORAGE@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1410 / 11/30/2014

Charleston /

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

SAVANNAH AID OPCO LLC

Alzheimer Care: No Max # Residents: 1**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 44****Resident Beds: 44 Resident Rooms: 39****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SC EPISCOPAL HOME AT STILL HOPES (CRCF)**

1 STILL HOPES DR

WEST COLUMBIA, SC 29169-7164 FACILITY #:803-796-6490

ROBERTSON, NIKKI W PH#: 803-796-6490

Facility Email: BLUGMAYER@STILLHOPESORG

Fac. Cont. Email: NROBERTSON@STILLHOPES.ORG

CRC-0144 / 07/31/2014

Lexington / Corporation

PO BOX 2959

WEST COLUMBIA, SC 29171-2959

SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPES

Alzheimer Care: Yes Max # Residents: 16**Alzheimer Unit: Yes Max # Beds: 24****Total Number of Licensed Beds: 24****Resident Beds: 24 Resident Rooms: 24****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SECESSIONVILLE COMMUNITY RESIDENCE**

1217 SECESSIONVILLE RD

CHARLESTON, SC 29412-9749 FACILITY #:843-762-2134

CAPERS, MADLYN PH#: 843-805-5820

Facility Email: DGOLDMINTZ@DSNCC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1287 / 12/31/2014

Charleston / State

PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNT

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 8****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SENECA PLACE

475 ROCHESTER HWY

SENECA, SC 29672-2475 FACILITY #:864-886-0070

WILLIAMS, CHERYL PH#:

Facility Email: LSPEARMAN@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1460 / 12/31/2014

Oconee / Ltd. Liability

475 ROCHESTER HWY

SENECA, SC 29672-2475

INN AT SENECA AID OPCO LLC

Alzheimer Care: Yes Max # Residents: 8**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 50****Resident Beds: 50 Resident Rooms: 40****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SENECA RESIDENTIAL CARE CENTER**

126 TOKEENA RD

SENECA, SC 29678-1744 FACILITY #:864-882-7390

HAMMERS, WILBURN E PH#: 864-882-7390

Facility Email: SENECARESIDENTIAL@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0337 / 12/31/2014

Oconee / Sole Proprietorship

PO BOX 428

SENECA, SC 29679-0428

WILBURN E HAMMERS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 33****Resident Beds: 33 Resident Rooms: 27****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SERENITY MANOR**

4018 S RHETT AVE

NORTH CHARLESTON, SC 29405-7163 FACILITY #:843-554-0733

FIELDS, HATTIE B PH#: 843-425-4422

Facility Email: HBFIELDS@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1472 / 02/28/2015

Charleston / Sole Proprietorship

PO BOX 21934

CHARLESTON, SC 29413-1934

FIELDS, HATTIE B

Alzheimer Care: Yes Max # Residents: 2**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SERENITY MANOR OF HOLLY HILL**

656 GARDNER BLVD

HOLLY HILL, SC 29059-8450 FACILITY #:803-496-3022

RILEY III, LUTHER PH#: 843-793-8731

Facility Email: LUTHER.RILEY@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1516 / 07/31/2014

Orangeburg / Limited Liability

704 SHELLEY RD

CHARLESTON, SC 29407-7023

SERENITY MANOR OF HOLLY HILL LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SEVILLE'S RESIDENTIAL CARE FACILITY

109 BENNETT LN
HAMPTON, SC 29924-1375 FACILITY #:803-943-9131
JENKINS, GENORA W PH#: 803-943-9131
Facility Email: PEPPERFORCE@YAHOO.COM
Fac. Cont. Email: PEPPERFORCE@YAHOO.COM

CRC-1178 / 08/31/2014
Hampton / Sole Proprietorship
109 BENNETT LN
HAMPTON, SC 29924-1375
GENORA W JENKINS

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 10
Resident Beds: 10 Resident Rooms: 6
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SHADOW OAKS ASSISTED LIVING COMMUNITY

108 GREGG AVE
AIKEN, SC 29801-6816 FACILITY #:803-643-0300
WILLIAMS, SANDRA G PH#: 803-643-0300
Facility Email: SWILLIAMS@SHADOW-OAKS.COM
Fac. Cont. Email: SWILLIAMS@SHADOW-OAKS.COM

CRC-1425 / 10/31/2014
Aiken / Ltd. Liability
108 GREGG AVE
AIKEN, SC 29801-6816
SHADOW OAKS ASSISTED LIVING COMMUNITY LLC

Alzheimer Care: Yes Max # Residents: 12
Alzheimer Unit: Yes Max # Beds: 12

Total Number of Licensed Beds: 56
Resident Beds: 56 Resident Rooms: 51
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SHEPHERD'S CARE CENTER

2100 N PLEASANTBURG DR
GREENVILLE, SC 29609-3156 FACILITY #:864-322-6212
THOMPSON, ERIC M PH#: 864-322-6212
Facility Email: ETHOMPSON@SHEPHERDSCARECENTER.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1326 / 10/31/2014
Greenville / Ltd. Liability
2100 N PLEASANTBURG DR
GREENVILLE, SC 29609-3156
SHEPHERD'S CARE CENTER LLC

Alzheimer Care: Yes Max # Residents: 10
Alzheimer Unit: Yes Max # Beds: 19

Total Number of Licensed Beds: 90
Resident Beds: 90 Resident Rooms: 58
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SHERMAN RESIDENTIAL CARE

20 MAYFIELD ST
GREENVILLE, SC 29601-1815 FACILITY #:864-242-0401
SHERMAN, OLISE S PH#: 864-242-0401
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1070 / 03/31/2015
Greenville / Partnership
20 MAYFIELD ST
GREENVILLE, SC 29601-1815
JESSE B SHERMAN SR AND OLISE SHERMAN

Alzheimer Care: Yes Max # Residents: 1
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 16
Resident Beds: 16 Resident Rooms: 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SIX MILE RETIREMENT CENTER

120 S MAIN ST

SIX MILE, SC 29682-9332 FACILITY #:864-868-9050

YORK, EDNA J PH#: 864-868-9050

Facility Email: SRETIREMENT@ATT.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0542 / 09/30/2014

Pickens / Sole Proprietorship

PO BOX 210

SIX MILE, SC 29682-0210

WILBURN E HAMMERS

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 41****Resident Beds: 41 Resident Rooms: 25****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SOMERBY OF MOUNT PLEASANT**

3100 TRADITION CIR

MOUNT PLEASANT, SC 29466-7153 FACILITY #:843-849-3096

FUNSCH, ROSEMARY S PH#:

Facility Email: RLYON@SOMERBYLIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1481 / 09/30/2014

Charleston / Ltd. Liability

2700 CORPORATE DR STE 125

BIRMINGHAM, AL 35242-2740

DOMINION SENIOR LIVING OF MT PLEASANT LLC

Alzheimer Care: Yes Max # Residents: 18**Alzheimer Unit: Yes Max # Beds: 38****Total Number of Licensed Beds: 118****Resident Beds: 118 Resident Rooms: 89****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SOUTH ISLAND ASSISTED LIVING**

2902 S ISLAND RD

GEORGETOWN, SC 29440-4420 FACILITY #:843-545-5427

GILES, MAXINE J PH#: 843-545-5427

Facility Email: SOUTHISLAND2003@GMAIL.COM

Fac. Cont. Email: MAXINE@SCCC.TV

CRC-1272 / 02/28/2015

Georgetown / Corporation

2902 S ISLAND RD

GEORGETOWN, SC 29440-4420

SOUTH ISLAND ASSISTED LIVING INC

Alzheimer Care: Yes Max # Residents: 3**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 32****Resident Beds: 32 Resident Rooms: 16****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SOUTHERN HERITAGE**

1713 CHARLESTON HWY

WEST COLUMBIA, SC 29169-5051 FACILITY #:803-796-3113

DOUGLAS SR, JONATHAN PH#: 803-796-3113

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0993 / 03/31/2015

Lexington / Corporation

PO BOX 25215

COLUMBIA, SC 29224-5215

QUALITY CARE SERVICES INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 4****Staff Beds: 1 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SOUTHERN OAKS PERSONAL CARE HOME

120 ROPER MOUNTAIN RD EXT
GREENVILLE, SC 29615-4823 FACILITY #:864-288-3271
BOUDREAU, GAIL R PH#: 864-288-3271
Facility Email: SO.OAKS@HOTMAIL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0611 / 12/31/2014
Greenville / Corporation
120 ROPER MOUNTAIN RD EXT
GREENVILLE, SC 29615-4823
EASTSIDE MANOR INC

Alzheimer Care: Yes **Max # Residents: 26**
Alzheimer Unit: Yes **Max # Beds: 26**

Total Number of Licensed Beds: 64
Resident Beds: 64 **Resident Rooms: 64**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

SOUTHSIDE RESIDENTIAL CARE

425 S WHEELER AVE
PROSPERITY, SC 29127-9347 FACILITY #:803-364-0022
BOSTON, TONJA L PH#: 803-364-0022
Facility Email: SOUTHSIDE7375@ATT.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1155 / 04/30/2015
Newberry / Sole Proprietorship
425 S WHEELER AVE
PROSPERITY, SC 29127-9347
ROY L BOWERS SR

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 30
Resident Beds: 30 **Resident Rooms: 12**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

SPRINGFIELD PLACE RESIDENTIAL CARE

2006 SPRINGFIELD CIR
NEWBERRY, SC 29108-3084 FACILITY #:803-405-1585
RANDELL, TY L PH#:
Facility Email: TRANSDALL@NEWBERRYCCRC.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1250 / 02/28/2015
Newberry / Limited Liability
2006 SPRINGFIELD CIR
NEWBERRY, SC 29108-3084
NEWBERRY OPERATOR LLC

Alzheimer Care: Yes **Max # Residents: 3**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 50
Resident Beds: 50 **Resident Rooms: 40**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

SPRINGHILL ASSISTED LIVING

514 S GUM ST
PAGELAND, SC 29728-9143 FACILITY #:843-675-2500
ROBERTSON SR, ROBBIE L PH#: 843-675-2500
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1171 / 07/31/2015
Chesterfield / Corporation
514 S GUM ST
PAGELAND, SC 29728-9143
HOSPICE OF CHESTERFIELD COUNTY INC

Alzheimer Care: Yes **Max # Residents: 3**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 32
Resident Beds: 32 **Resident Rooms: 22**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SPRINGS AT SIMPSONVILLE

214 E CURTIS ST
SIMPSONVILLE, SC 29681-2622 FACILITY #:864-962-8570
DEWITT, JAMES A PH#: 864-962-8570
Facility Email: JIMD@CARAVITA.COM
Fac. Cont. Email: JIMD@CARAVITA.COM

CRC-1198 / 05/31/2015
Greenville / Ltd. Liability
214 E CURTIS ST
SIMPSONVILLE, SC 29681-2622
CURTIS GROUP LLC

Alzheimer Care: Yes **Max # Residents: 16**
Alzheimer Unit: Yes **Max # Beds: 16**

Total Number of Licensed Beds: 89
Resident Beds: 89 **Resident Rooms: 62**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

STEPHANIE'S RESIDENTIAL CARE FACILITY

4033 DELREE ST
WEST COLUMBIA, SC 29170-1526 FACILITY #:803-356-7542
PEOPLES, TIFFANY R PH#: 803-754-4594
Facility Email: STEPHANIES.RESIDENTIAL@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1193 / 04/30/2014 (Renewal Pending)
Lexington / Sole Proprietorship
4033 DELREE ST, PO BOX 31
WEST COLUMBIA, SC 29170-1532
YVONNE HARRISON

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 12
Resident Beds: 12 **Resident Rooms: 6**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

STERLING HOUSE OF CENTRAL

131 VICKERY DR
CENTRAL, SC 29630-8330 FACILITY #:864-653-4674
HAMMOND, ANGELA PH#: 864-653-4674
Facility Email: SHCENTRAL@BROOKDALELIVING.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1307 / 12/31/2014
Pickens / Corporation
131 VICKERY DR
CENTRAL, SC 29630-8330
BROOKDALE SENIOR LIVING COMMUNITIES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 52
Resident Beds: 52 **Resident Rooms: 42**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

STERLING HOUSE OF GREENVILLE

2010 BRUSHY CREEK RD
GREER, SC 29650-2614 FACILITY #:864-244-9994
CARRION, MARY M PH#: 864-886-0070
Facility Email: SHGREENVILLESC@BROOKDALELIVING.COM
Fac. Cont. Email: MCARRYON@AOL.COM

CRC-1306 / 12/31/2014
Greenville / Corporation
2010 BRUSHY CREEK RD
GREER, SC 29650-2614
BROOKDALE SENIOR LIVING COMMUNITIES INC

Alzheimer Care: Yes **Max # Residents: 52**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 52
Resident Beds: 52 **Resident Rooms: 42**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

STERLING HOUSE OF GREENWOOD

1408 PKWY RD
GREENWOOD, SC 29646-4043 FACILITY #:864-223-2281
PH#:
Facility Email: SHGREENWOOD@BROOKDALELIVING.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1309 / 12/31/2014
Greenwood / Corporation
1408 PKWY
GREENWOOD, SC 29646-4043
BROOKDALE SENIOR LIVING COMMUNITIES INC

Alzheimer Care: Yes **Max # Residents: 52**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 52
Resident Beds: 52 **Resident Rooms: 44**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

STERLING HOUSE OF HARBISON

51 WOODCROSS DR
COLUMBIA, SC 29212-2350 FACILITY #:803-732-0300
SHEALY, DEBORAH M PH#: 803-732-0300
Facility Email: SHHARBISON@BROOKDALELIVING.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1311 / 12/31/2014
Richland / Corporation
51 WOODCROSS DR
COLUMBIA, SC 29212-2350
BROOKDALE SENIOR LIVING COMMUNITIES INC

Alzheimer Care: Yes **Max # Residents: 13**
Alzheimer Unit: Yes **Max # Beds: 12**

Total Number of Licensed Beds: 52
Resident Beds: 52 **Resident Rooms: 42**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

STERLING HOUSE OF NORTH AUGUSTA

105 N HILLS DR OFC
NORTH AUGUSTA, SC 29841-0113 FACILITY #:803-819-0034
LARKE, ANGELA CORBIN PH#: 803-819-0034
Facility Email: SHNAUGUSTA@BROOKDALELIVING.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1298 / 12/31/2014
Aiken / Corporation
105 N HILLS DR OFC
NORTH AUGUSTA, SC 29841-0113
BROOKDALE SENIOR LIVING COMMUNITIES INC

Alzheimer Care: Yes **Max # Residents: 52**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 52
Resident Beds: 52 **Resident Rooms: 42**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

STERLING HOUSE OF PARKLANE

251 SPRINGTREE DR
COLUMBIA, SC 29223-7989 FACILITY #:803-741-2600
SHULL, BRIAN D PH#: 803-741-2600
Facility Email: SHPARKLANE@BROOKDALELIVING
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1310 / 12/31/2014
Richland / Corporation
251 SPRINGTREE DR
COLUMBIA, SC 29223-7989
BROOKDALE SENIOR LIVING COMMUNITIES INC

Alzheimer Care: Yes **Max # Residents: 42**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 52
Resident Beds: 52 **Resident Rooms: 42**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

STERLING HOUSE OF ROCK HILL

1920 EBENEZER RD

ROCK HILL, SC 29732-1014 FACILITY #:803-366-1189

EDGELL III, ANNIAS W PH#: 803-366-1189

Facility Email: SHROCKHILL@BROOKDALELIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1308 / 12/31/2014

York / Corporation

1920 EBENEZER RD

ROCK HILL, SC 29732-1014

BROOKDALE SENIOR LIVING COMMUNITIES INC

Alzheimer Care: Yes Max # Residents: 52**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 52****Resident Beds: 52 Resident Rooms: 42****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****STERLING HOUSE OF SUMTER**

1180 WILSON HALL RD

SUMTER, SC 29150-1738 FACILITY #:803-469-4508

PH#:

Facility Email: GBROWN6@BROOKDALELIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1312 / 12/31/2014

Sumter / Corporation

1180 WILSON HALL RD

SUMTER, SC 29150-1738

BROOKDALE SENIOR LIVING COMMUNITIES INC

Alzheimer Care: Yes Max # Residents: 52**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 52****Resident Beds: 52 Resident Rooms: 42****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****STOKES RESIDENTIAL CARE**

2525 SAINT MATTHEWS RD

ORANGEBURG, SC 29118-1319 FACILITY #:803-533-0070

STOKES, ALBERT O PH#: 803-533-0070

Facility Email: STOKES411@SC.RR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0570 / 02/28/2015

Orangeburg / Partnership

1027 BERKELEY DR

ORANGEBURG, SC 29118-8356

ALBERT STOKES AND DELAURA STOKES

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 17****Resident Beds: 17 Resident Rooms: 9****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SUMMERS LANDING POLO ROAD**

651 POLO RD

COLUMBIA, SC 29223-2905 FACILITY #:803-788-9555

BERG, SHANNON J PH#: 843-667-6699

Facility Email: DBERG77777@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1514 / 04/30/2014 (Renewal Pending)

Richland / Limited Liability

651 POLO RD

COLUMBIA, SC 29223-2905

POLO ROAD ASSISTED LIVING LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 26****Resident Beds: 26 Resident Rooms: 24****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SUMMIT HILLS ASSISTED LIVING COMMUNITY

100 SUMMIT HILLS DR
SPARTANBURG, SC 29307-1532 FACILITY #:864-591-2222
GOODWIN, ANNETTE S PH#: 864-591-2222
Facility Email: AGOODWIN@SUMMIT-HILLS.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1113 / 09/30/2014
Spartanburg / Ltd. Liability
100 SUMMIT HILLS DR
SPARTANBURG, SC 29307-1532
SUMMIT HILLS LLC

Alzheimer Care: Yes **Max # Residents: 23**
Alzheimer Unit: Yes **Max # Beds: 12**

Total Number of Licensed Beds: 79
Resident Beds: 79 **Resident Rooms: 64**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

SUMMIT PLACE OF ANDERSON

107 PERPETUAL SQ
ANDERSON, SC 29621-1713 FACILITY #:864-222-9880
PH#:
Facility Email: ED@SUMMITOFANDERSON.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1151 / 10/31/2014
Anderson / Limited Liability
CSL SUMMIT PLACE SC LLC

Alzheimer Care: Yes **Max # Residents: 28**
Alzheimer Unit: Yes **Max # Beds: 32**

Total Number of Licensed Beds: 89
Resident Beds: 89 **Resident Rooms: 70**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

SUMMIT PLACE OF BEAUFORT

1119 PICK POCKET PLANTATION DR
BEAUFORT, SC 29902-3771 FACILITY #:843-770-0105
LEE-POTTER, KEARA N PH#: 843-770-0105
Facility Email: No Facility Email on Record
Fac. Cont. Email: KPOTTER@SDBELL.COM

CRC-1375 / 06/30/2014
Beaufort / Corporation
SNH SE TENANT TRS INC

Alzheimer Care: Yes **Max # Residents: 44**
Alzheimer Unit: Yes **Max # Beds: 44**

Total Number of Licensed Beds: 87
Resident Beds: 87 **Resident Rooms: 72**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

SUMMIT PLACE OF DANIEL ISLAND

320 SEVEN FARMS DR
DANIEL ISLAND, SC 29492-7532 FACILITY #:843-814-9238
DAVIS, SEAN C PH#: 843-762-1396
Facility Email: LICENSING@5SQC.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1282 / 05/31/2015
Berkeley / Limited Liability
400 CENTRE ST, FIVE STAR QUALITY CARE-LICENSING
NEWTON, MA 02458-2094
SNH SE DANIEL ISLAND TENANT LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 76
Resident Beds: 76 **Resident Rooms: 59**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SUMMIT PLACE OF NORTH MYRTLE BEACH

491 HWY 17

LITTLE RIVER, SC 29566-8082 FACILITY #:843-399-5662

JACKSON, THOMAS L PH#: 843-399-5662

Facility Email: No Facility Email on Record

Fac. Cont. Email: MBESTATE@SCCOAST.NET

CRC-1360 / 06/30/2014

Horry / Corporation

SNH SE N MYRTLE BEACH TENANT LLC

Alzheimer Care: Yes Max # Residents: 23**Alzheimer Unit: Yes Max # Beds: 24****Total Number of Licensed Beds: 80****Resident Beds: 80 Resident Rooms: 71****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SUNNY PINES BOARDING HOME**

108 W GAPWAY RD

ANDREWS, SC 29510-6786 FACILITY #:843-221-7436

PAPILLION, GLORIA F PH#: 843-221-7436

Facility Email: SUNNYPINES57@MSN.COM

Fac. Cont. Email: SUNNYPINES57@MSN.COM

CRC-0098 / 05/31/2015

Georgetown / Sole Proprietorship

PO BOX 732

ANDREWS, SC 29510-0732

MATTIE H DUROUSSEAU

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 18****Resident Beds: 18 Resident Rooms: 10****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SWEETGRASS COURT SENIOR LIVING COMMUNITY**

1010 ANNA KNAPP BLVD

MOUNT PLEASANT, SC 29464-5400 FACILITY #:843-971-7756

CARLETON, KELLY J PH#: 843-971-7756

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1428 / 12/31/2014

Charleston / Limited Liability

400 CENTRE ST

NEWTON, MA 02458-2094

FIVE STAR QUALITY CARE-OBX OPERATOR LLC

Alzheimer Care: Yes Max # Residents: 38**Alzheimer Unit: Yes Max # Beds: 38****Total Number of Licensed Beds: 38****Resident Beds: 38 Resident Rooms: 32****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****SWEETGRASS VILLAGE ASSISTED LIVING COMMUNITY**

601 MATHIS FERRY RD

MOUNT PLEASANT, SC 29464-2623 FACILITY #:843-881-9809

MCLEOD, LISA DICKEY PH#: 843-881-9809

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1427 / 12/31/2014

Charleston / Limited Liability

601 MATHIS FERRY RD

MOUNT PLEASANT, SC 29464-2623

FIVE STAR QUALITY CARE-OBX OPERATOR LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 85****Resident Beds: 85 Resident Rooms: 69****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

TALL PINES ASSISTED LIVING

1771 ELM RD
CHARLESTON, SC 29414-6343 FACILITY #:843-763-8134
GADSDEN, ADA R PH#: 843-763-8134
Facility Email: TALLPINESRCH@YAHOO.COM
Fac. Cont. Email: CGADSDEN@COMCAST.NET

CRC-0531 / 08/31/2014
Charleston / Sole Proprietorship
1771 ELM RD
CHARLESTON, SC 29414-6343
ADA R GADSDEN

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 2 **Staff Rooms: 2**
Other Beds: 0 **Other Rooms: 0**

TERRACE

230 S HEYWARD ST
BISHOPVILLE, SC 29010-1022 FACILITY #:803-692-6003
GAINEY, FELECIA H PH#: 803-692-6003
Facility Email: JEKOSR@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1535 / 08/30/2014
Lee / Limited Liability
230 S HEYWARD ST
BISHOPVILLE, SC 29010-1022
TERRACE CRCF LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 5**
Staff Beds: 2 **Staff Rooms: 2**
Other Beds: 0 **Other Rooms: 0**

THORNE RETIREMENT HOME

702 W 3RD AVE
LAKE VIEW, SC 29563-3302 FACILITY #:843-759-9099
SANDERSON, JAMES N PH#: 843-759-9099
Facility Email: JNSANDERSON@COOKE-ASSOCIATES.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0626 / 03/31/2015
Dillon / Corporation
702 W 3RD AVE
LAKE VIEW, SC 29563-3302
COOKE ARNETTE AND COOKE INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 76
Resident Beds: 76 **Resident Rooms: 40**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

TRINITY ON LAURENS

213 LAURENS ST NW
AIKEN, SC 29801-3911 FACILITY #:803-643-4203
HENRICH, CONSTANCE M PH#: 803-643-4200
Facility Email: CHENRICH@TRINITYONLAURENS.ORG
Fac. Cont. Email: CHENRICH@TRINITYLUTHERANSC.ORG

CRC-0935 / 06/30/2014
Aiken / Non-Profit Corporation
213 LAURENS ST NW
AIKEN, SC 29801-3911
LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 55
Resident Beds: 55 **Resident Rooms: 55**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

TURNING POINT CRCF

820 TOMS CREEK RD

HOPKINS, SC 29061-8798 FACILITY #:803-647-1152

PH#:

Facility Email: VCH47@SCDMH.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1356 / 01/30/2015

Richland / State

20 POWDERHORN RD

SIMPSONVILLE, SC 29681-3399

PIEDMONT CENTER FOR MENTAL HEALTH SERVICES

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 15****Resident Beds: 15 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****TWILITE MANOR ADULT RESIDENTIAL CARE**

2306 FORREST ST

CAYCE, SC 29033-2124 FACILITY #:803-794-7561

WEATHERFORD, JENNY G PH#: 803-794-7561

Facility Email: JENNYWEATHERFORD3@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1210 / 05/31/2015

Lexington /

SEASHAR LLC

Alzheimer Care: Yes Max # Residents: 1**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 28****Resident Beds: 28 Resident Rooms: 16****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****TYLER RESTMORE HOME**

1681 BROUGHTON ST

ORANGEBURG, SC 29115-4873 FACILITY #:803-536-0740

ANTLEY, MICHELLE L PH#: 803-536-0740

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0841 / 07/31/2014

Orangeburg / Ltd. Liability

TYLER RESTMORE HOME LLC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 3****Staff Beds: 2 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****TYLER RESTMORE HOME #2**

195 SELLERS AVE

ORANGEBURG, SC 29115-6724 FACILITY #:803-531-2074

ANTLEY, MICHELLE L PH#: 803-536-0740

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0889 / 07/31/2014

Orangeburg / Ltd. Liability

TYLER RESTMORE HOME LLC

Alzheimer Care: Yes Max # Residents: 1**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 9****Resident Beds: 9 Resident Rooms: 3****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

UPSTATE RESIDENTIAL CARE

1302 S MCDUFFIE ST
ANDERSON, SC 29624-2745 FACILITY #:864-225-6901
KELLER, BOBBIE J PH#: 864-225-6901

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0233 / 08/31/2014

Anderson / Sole Proprietorship

HORACE, J ALEXANDER

Alzheimer Care: Yes **Max # Residents: 1**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 4**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

VANGUARD RESIDENTIAL SERVICES I

100 E HOSPITAL ST
MANNING, SC 29102-3158 FACILITY #:803-435-2330
RILEY, ROSALYN E PH#: 803-435-2330

Facility Email: THOMMYSCOTT@YAHOO.COM

Fac. Cont. Email: CCDSN@YAHOO.COM

CRC-1313 / 06/30/2014

Clarendon / Non-Profit Corporation

PO BOX 40

MANNING, SC 29102-0040

VANGUARD RESIDENTIAL SERVICES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

VANGUARD RESIDENTIAL SERVICES II

512 S CHURCH ST
MANNING, SC 29102-3122 FACILITY #:803-435-2330
RILEY, ROSALYN E PH#: 803-435-2330

Facility Email: THOMMYSCOTT@YAHOO.COM

Fac. Cont. Email: CCDSN@YAHOO.COM

CRC-1314 / 06/30/2014

Clarendon / Non-Profit Corporation

PO BOX 40

MANNING, SC 29102-0040

VANGUARD RESIDENTIAL SERVICES INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 8
Resident Beds: 8 **Resident Rooms: 8**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

VANWYEVEER RESIDENTIAL CARE FACILITY

2009 COSGROVE AVE
NORTH CHARLESTON, SC 29405-5702 FACILITY #:843-744-6065
FULTON, RHODELLE W PH#: 843-744-6065

Facility Email: VANWYEVEER1@AOL.COM

Fac. Cont. Email: VANWYEVEER1@AOL.COM

CRC-0638 / 06/30/2014

Charleston / Sole Proprietorship

PO BOX 71184

NORTH CHARLESTON, SC 29415-1184

RHODELLE W FULTON

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 5**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

VARNVILLE COMMUNITY RESIDENCE

266 HAMPTON RD

VARNVILLE, SC 29944 FACILITY #:803-943-4818

MCQUIRE, ELISE S PH#: 803-943-4818

Facility Email: ELISEMAC@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1211 / 05/31/2015

Hampton /

PO BOX 128

HAMPTON, SC 29924

HAMPTON COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 8****Resident Beds: 8 Resident Rooms: 2****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****VICTORIAN HOME**

313 WARLEY ST

FLORENCE, SC 29501-4730 FACILITY #:843-664-3090

NWANKUDU, ADA O PH#: 803-664-3090

Facility Email: ANWANKUDU@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1487 / 04/30/2015

Florence / Sole Proprietorship

1160 BERKLEY AVE

FLORENCE, SC 29505-3006

ADA O NWANKUDU

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 5****Resident Beds: 5 Resident Rooms: 3****Staff Beds: 0 Staff Rooms: 1****Other Beds: 0 Other Rooms: 0****VILLAGE AT SUMMERVILLE**

201 W 9TH NORTH ST OFC 140

SUMMERVILLE, SC 29483-6701 FACILITY #:843-873-2550

MILLER, ROBIN C PH#: 843-873-2550

Facility Email: RMILLER@PRESHOMESC.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0245 / 09/30/2014

Dorchester / Non-Profit Corporation

201 W 9TH NORTH ST OFC 140

SUMMERVILLE, SC 29483-6701

PRESBYTERIAN HOME OF SOUTH CAROLINA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 114****Resident Beds: 114 Resident Rooms: 86****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****VILLAGE AT SUMMERVILLE**

201 W 9TH NORTH ST OFC 140

SUMMERVILLE, SC 29483-6701 FACILITY #:843-873-2550

MILLER, ROBIN C PH#: 843-873-2550

Facility Email: RMILLER@PRESHOMESC.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0245 / 09/30/2014

Dorchester / Non-Profit Corporation

201 W 9TH NORTH ST OFC 140

SUMMERVILLE, SC 29483-6701

PRESBYTERIAN HOME OF SOUTH CAROLINA

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 114****Resident Beds: 114 Resident Rooms: 86****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

VILLAGE COMMUNITY CARE HOME-UNIT A

1250 SALEM CHURCH RD

ANDERSON, SC 29625-1310 FACILITY #:864-225-4336

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Facility Email: VILLAGECARE365@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0563 / 01/31/2015

Anderson / Corporation

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 11****Resident Beds: 11 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****VILLAGE COMMUNITY CARE HOME-UNIT B**

1250 SALEM CHURCH RD

ANDERSON, SC 29625-1310 FACILITY #:864-225-4336

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Facility Email: VILLAGECARE365@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0564 / 01/31/2015

Anderson / Corporation

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 11****Resident Beds: 11 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****VILLAGE COMMUNITY CARE HOME-UNIT C**

1250 SALEM CHURCH RD

ANDERSON, SC 29625-1310 FACILITY #:864-225-4336

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Facility Email: VILLAGECARE365@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0565 / 01/31/2015

Anderson / Corporation

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 11****Resident Beds: 11 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****VILLAGE COMMUNITY CARE HOME-UNIT D**

1250 SALEM CHURCH RD

ANDERSON, SC 29625-1310 FACILITY #:864-225-4336

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Facility Email: VILLAGECARE@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0566 / 01/31/2015

Anderson / Corporation

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 11****Resident Beds: 11 Resident Rooms: 6****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

VILLAGE INN COMMUNITY CARE HOME

112 POWELL ST
GRANITEVILLE, SC 29829-2906 FACILITY #:803-663-9495
HERRON, MICHELE A PH#: 803-663-9495
Facility Email: VILLAGEINNCCCH@BELLSOUTH.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0396 / 03/31/2015
Aiken / Sole Proprietorship
112 POWELL ST
GRANITEVILLE, SC 29829-2906
MICHELE A HERRON

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 10
Resident Beds: 10 Resident Rooms: 5
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

WALTERS BROTHERS RESIDENTIAL CARE FACILITY

110 GEDDINGS RD
SUMTER, SC 29150-8812 FACILITY #:803-506-2743
PH#:
Facility Email: JOHNNIE15@FTC-I.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1080 / 04/30/2014 (Renewal Pending)
Sumter / Sole Proprietorship
3300 OLD MANNING RD
SUMTER, SC 29150-9701
JOHNNIE L WALTERS

Alzheimer Care: Yes Max # Residents: 6
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 20
Resident Beds: 20 Resident Rooms: 10
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

WALTERS RESIDENTIAL CARE

821 DUKE AVE, 821-823
COLUMBIA, SC 29203-5651 FACILITY #:803-252-8918
PH#:
Facility Email: WALTERS1987@BELLSOUTH.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0985 / 03/31/2015
Richland / Non-Profit Corporation
PO BOX 211263
COLUMBIA, SC 29221-6263
MIPD INC

Alzheimer Care: Yes Max # Residents: 3
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 35
Resident Beds: 35 Resident Rooms: 18
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

WARE SHOALS MANOR

10 N GREENWOOD AVE
WARE SHOALS, SC 29692-1239 FACILITY #:864-456-7127
OBI-MELEKWE, BERNICE O PH#: 864-456-7127
Facility Email: BERNICE@HARMONYRES.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1457 / 10/31/2014
Greenwood / Ltd. Liability
483 LOCKHART LN
GAFFNEY, SC 29341-2841
HARMONY RESIDENTIAL CARE CENTER LLC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 24
Resident Beds: 24 Resident Rooms: 12
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

WE CARE RESIDENTIAL

2370 WILLISTON RD
AIKEN, SC 29803-9100 FACILITY #:803-652-3652
BUSH, ETHEL E PH#: 803-652-3652
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1034 / 08/31/2014
Aiken / Corporation
2394 WILLISTON RD
AIKEN, SC 29803-9100
WE CARE RESIDENTIAL INC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 55
Resident Beds: 55 Resident Rooms: 27
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

WESLEY COMMONS ASSISTED LIVING FACILITY & SPECIAL CARE HOUSE

1110 MARSHALL RD
GREENWOOD, SC 29646-4299 FACILITY #:864-227-7480
HOLMES MOODY, KIMBERLY K PH#: 864-227-7250
Facility Email: KHOLMES@WESLEYCOMMONS.ORG
Fac. Cont. Email: KHOLMES@WESLEYCOMMONS.ORG

CRC-1218 / 08/31/2014
Greenwood / Non-Profit Corporation
1110 MARSHALL RD
GREENWOOD, SC 29646-4299
WESLEY COMMONS

Alzheimer Care: Yes Max # Residents: 12
Alzheimer Unit: Yes Max # Beds: 12

Total Number of Licensed Beds: 56
Resident Beds: 56 Resident Rooms: 47
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

WESLEY COURT ASSISTED LIVING COMMUNITY

916 WESLEY CT
BOILING SPRINGS, SC 29316-5649 FACILITY #:864-599-9929
TURNAGE, HEATHER R PH#: 864-599-9929
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1289 / 12/31/2014
Spartanburg / Limited Liability
916 WESLEY CT
BOILING SPRINGS, SC 29316-5649
WESLEY COURT ASSISTED LIVING FACILITY LLC

Alzheimer Care: No Max # Residents: 0
Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 65
Resident Beds: 65 Resident Rooms: 57
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

WESLEYAN SUITES

2100 TWIN CHURCH RD
FLORENCE, SC 29501-8200 FACILITY #:843-664-0700
TABOR, TERESSA L PH#: 843-664-0700
Facility Email: TTABOR@METHODIST-MANOR.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0662 / 12/31/2014
Florence / Non-Profit Corporation
2100 TWIN CHURCH RD
FLORENCE, SC 29501-8200
UNITED METHODIST MANOR OF THE PEE DEE (NPC)

Alzheimer Care: Yes Max # Residents: 12
Alzheimer Unit: Yes Max # Beds: 12

Total Number of Licensed Beds: 95
Resident Beds: 95 Resident Rooms: 95
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

WEST END RETIREMENT CENTER

200 S 5TH ST

EASLEY, SC 29640-2826 FACILITY #:864-859-4370

BLIHAR, DEBRA PH#:

Facility Email: WESTENDRETIREMENT-CENTER-@HOTMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0204 / 08/31/2014

Pickens / Corporation

200 S 5TH ST

EASLEY, SC 29640-2826

WEST END RETIREMENT CENTER INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 34****Resident Beds: 34 Resident Rooms: 14****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****WESTMINSTER TOWERS RESIDENTIAL**

1330 INDIA HOOK RD

ROCK HILL, SC 29732-2462 FACILITY #:803-328-5000

STAMPER, AMANDA L PH#: 803-328-5000

Facility Email: MSTAMPER@WESTMINSTERTOWERS.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0580 / 09/30/2014

York / Non-Profit Corporation

1330 INDIA HOOK RD

ROCK HILL, SC 29732-2462

WESTMINSTER PRESBYTERIAN CENTER INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: Yes Max # Beds: 0****Total Number of Licensed Beds: 29****Resident Beds: 29 Resident Rooms: 29****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****WESTSIDE RESIDENTIAL HOME**

4112 HARTFORD ST

COLUMBIA, SC 29204-3025 FACILITY #:803-786-7411

JOHNSON, LOVICE D PH#: 803-786-7411

Facility Email: JENTOMMATT@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0907 / 11/30/2014

Richland / Corporation

PO BOX 7905

COLUMBIA, SC 29202-7905

WESTSIDE RESIDENTIAL HOME INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 38****Resident Beds: 38 Resident Rooms: 11****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0****WHITAKER COMMUNITY CARE HOME**

79 SAL SUE CT

COLUMBIA, SC 29224-2383 FACILITY #:803-786-8561

ANDERSON, VALENCIA W PH#:

Facility Email: MSVSLITTLE@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0210 / 08/31/2014

Richland / Corporation

PO BOX 25584

COLUMBIA, SC 29224-5584

MURRY'S COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0**Alzheimer Unit: No Max # Beds: 0****Total Number of Licensed Beds: 10****Resident Beds: 10 Resident Rooms: 5****Staff Beds: 0 Staff Rooms: 0****Other Beds: 0 Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

WHITE OAK ESTATES ASSISTED LIVING

400 WEBBER RD
SPARTANBURG, SC 29307-2400 FACILITY #:864-579-7004
GIBBS, TAMMY L PH#: 803-684-0035
Facility Email: TGIBBS@WHITEOAKMANOR.COM
Fac. Cont. Email: TGIBBS@WHITEOAKMANOR.COM

CRC-1334 / 09/30/2014
Spartanburg / Corporation
400 WEBBER RD
SPARTANBURG, SC 29307-2400
WHITE OAK ESTATES ASSISTED LIVING INC

Alzheimer Care: Yes **Max # Residents: 2**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 45
Resident Beds: 45 **Resident Rooms: 30**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

WHITNEY PLACE

107 CORNWELL ST
UNION, SC 29379-2404 FACILITY #:864-427-4275
WHITNEY, YOLANDE O PH#: 864-427-4275
Facility Email: WHITNEYPLACE@ATT.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0572 / 02/28/2015
Union / Corporation
107 CORNWELL ST
UNION, SC 29379-2404
WHITNEY CORPORATION OF COLUMBIA INC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 24
Resident Beds: 24 **Resident Rooms: 14**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

WILDEWOOD DOWNS ASSISTED LIVING COMMUNITY

731 POLO RD
COLUMBIA, SC 29223-4462 FACILITY #:803-788-5115
STUDNICKA, STEPHANIE PH#: 803-788-5115
Facility Email: SSTUDNICKA@WILDEWOOD-DOWNS.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1271 / 03/31/2015
Richland / Ltd. Liability
731 POLO RD
COLUMBIA, SC 29223-4462
WILDEWOOD DOWNS RETIREMENT LLC

Alzheimer Care: Yes **Max # Residents: 8**
Alzheimer Unit: Yes **Max # Beds: 8**

Total Number of Licensed Beds: 57
Resident Beds: 57 **Resident Rooms: 49**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

WILLIAMS COMMUNITY CARE HOME

7705 RICHARD ST
COLUMBIA, SC 29209-3733 FACILITY #:803-783-1223
WILLIAMS, CHARLES A PH#: 803-783-1223
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0280 / 11/30/2014
Richland / Sole Proprietorship
PO BOX 90031
COLUMBIA, SC 29290-1031
CHARLES A WILLIAMS SR

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 4**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

WILLIAMSBURG RESIDENTIAL CARE FACILITY

14 WRCF ST
KINGSTREE, SC 29556-2596 FACILITY #:843-355-6214
PH#:

Facility Email: WRCF@FTC-I.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0038 / 03/31/2015

Williamsburg / Sole Proprietorship

PO BOX 63

SALTERS, SC 29590-0063

JACKSON, JACQUES G

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 24
Resident Beds: 24 **Resident Rooms: 9**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

WILLIE S II RCH

46 WILSON ST
SUMTER, SC 29150-3050 FACILITY #:803-773-4724
WILLIAMS, TRACY L PH#: 803-481-7027

Facility Email: ACETW90@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1485 / 12/31/2014

Sumter / Sole Proprietorship

PO BOX 3311

SUMTER, SC 29151-3311

WILLIAMS, TRACY L

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

WILLOWS OF EASLEY

105 WILLOW PL
EASLEY, SC 29640-1385 FACILITY #:864-855-9800
BOLTON, SUSAN W PH#: 864-855-9800

Facility Email: KEVIN@THEWILLOWSOFEASLEY.COM

Fac. Cont. Email: KEVIN@THEWILLOWSOFEASLEY.COM

CRC-0944 / 06/30/2015

Pickens / Corporation

PO BOX 1807

EASLEY, SC 29641-1807

WILLOWS OF EASLEY INC

Alzheimer Care: Yes **Max # Residents: 7**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 50
Resident Beds: 50 **Resident Rooms: 48**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

WINDSOR HOUSE GREENVILLE

1931 PELHAM RD
GREENVILLE, SC 29615-4002 FACILITY #:864-288-9450
POLLARD JR, JOE W PH#: 864-288-9450

Facility Email: JPOLLARD212@AOL.COM

Fac. Cont. Email: JPOLLARD212@AOL.COM

CRC-1388 / 07/31/2014

Greenville / Ltd. Liability

1931 PELHAM RD

GREENVILLE, SC 29615-4002

WHG ASSISTED LIVING LLC

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 50
Resident Beds: 50 **Resident Rooms: 37**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

WINDSOR HOUSE WEST

850 JOHN B WHITE SR BLVD
SPARTANBURG, SC 29306-4034 FACILITY #:864-576-8910
BOWMAN, KAREN S PH#: 864-576-8910
Facility Email: WHADMIN@WINDSOR-HOUSE.NET
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1369 / 11/30/2014
Spartanburg / Ltd. Liability
PO BOX 6384
SPARTANBURG, SC 29304-6384
WHW ASSOCIATES LLC

Alzheimer Care: Yes **Max # Residents: 42**
Alzheimer Unit: Yes **Max # Beds: 45**

Total Number of Licensed Beds: 108
Resident Beds: 108 **Resident Rooms: 75**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

WINDSOR HOUSE WEST I

850 JOHN B WHITE SR BLVD
SPARTANBURG, SC 29306-4034
SHOUP, HAL E PH#: 864-576-8910
Facility Email: No Facility Email on Record
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1224 / 03/31/2006 (Renewal Pending)
Spartanburg / Ltd. Liability
850 JOHN B WHITE SR BLVD
SPARTANBURG, SC 29306-4034
SALI MANAGEMENT ADVISORS L L C

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 32
Resident Beds: 32 **Resident Rooms: 22**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

WOODARD'S COMMUNITY CARE HOME I

615 W EVANS ST
FLORENCE, SC 29501-3409 FACILITY #:843-665-4940
EADDY, MARCOLA C PH#: 843-968-8089
Facility Email: RC@AOL.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-0301 / 08/31/2014
Florence / Sole Proprietorship
PO BOX 255
FLORENCE, SC 29503-0255
MARCOLA EADDY

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 4**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

WRIGHT'S RESIDENTIAL CARE #1

950 OLD SPARTANBURG HWY
WELLFORD, SC 29385 FACILITY #:864-249-0412
WRIGHT, DIANNE E PH#: 864-249-0412
Facility Email: DIWRIGHT57@YAHOO.COM
Fac. Cont. Email: DDIANE40SC@AOL.COM

CRC-0617 / 01/30/2015
Spartanburg / Sole Proprietorship
PO BOX 268
WELLFORD, SC 29385-0268
DIANNE E WRIGHT

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 4**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

WRIGHT'S RESIDENTIAL CARE #2 A & B

12 RIVER ST, 12A & 12B
LYMAN, SC 29365-1714 FACILITY #:864-249-0412
WRIGHT, DIANNE E PH#: 864-949-6437
Facility Email: DIWRIGHT57@YAHOO.COM
Fac. Cont. Email: DIWRIGHT57@YAHOO.COM

CRC-1319 / 07/31/2014
Spartanburg / Sole Proprietorship
PO BOX 268
WELLFORD, SC 29385-0268
DIANNE E WRIGHT

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 10
Resident Beds: 10 **Resident Rooms: 5**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

YOUNGBLOOD'S ASSISTED LIVING HOME

1500 FORK AVE
IRMO, SC 29063-9459 FACILITY #:803-740-4861
YOUNGBLOOD, ANGELA S PH#: 803-740-4861
Facility Email: YOUNGBLOODS@SC.RR.COM
Fac. Cont. Email: YOUNGBLOODS@SC.RR.COM

CRC-1433 / 02/28/2015
Lexington / Sole Proprietorship
1500 FORK AVE
IRMO, SC 29203-9115
ANGELA S YOUNGBLOOD

Alzheimer Care: Yes **Max # Residents: 5**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 5
Resident Beds: 5 **Resident Rooms: 3**
Staff Beds: 1 **Staff Rooms: 1**
Other Beds: 0 **Other Rooms: 0**

ZEIGLER STREET COMMUNITY RESIDENCE

71 ZEIGLER ST
BAMBERG, SC 29003-1034 FACILITY #:803-245-6169
JAMES, GLORIA M PH#: 803-793-5003
Facility Email: GLORIAJ_29059@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1297 / 06/30/2014
Bamberg /

BAMBERG COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 9
Resident Beds: 9 **Resident Rooms: 5**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

ZION HOUSE A

121 MOORE ST
WALTERBORO, SC 29488-4463 FACILITY #:843-782-3238
HITCHMAN, MARTINA E PH#: 803-259-7472
Facility Email: CLIJLW@YAHOO.COM
Fac. Cont. Email: No Facility Contact Email on Record

CRC-1529 / 10/31/2014
Colleton / Sole Proprietorship

WILLIAMS, BARBARA A

Alzheimer Care: No **Max # Residents: 0**
Alzheimer Unit: No **Max # Beds: 0**

Total Number of Licensed Beds: 4
Resident Beds: 4 **Resident Rooms: 3**
Staff Beds: 0 **Staff Rooms: 0**
Other Beds: 0 **Other Rooms: 0**

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

Total Number of Facilities:	476	Alzheimers Care :	178	Alzheimers Units :	90	Licensed Beds :	17,075
Resident Beds :	17,075	Staff Beds :	131	Other Beds :	0		
Resident Rooms :	12,336	Staff Rooms :	106	Other Rooms :	0		